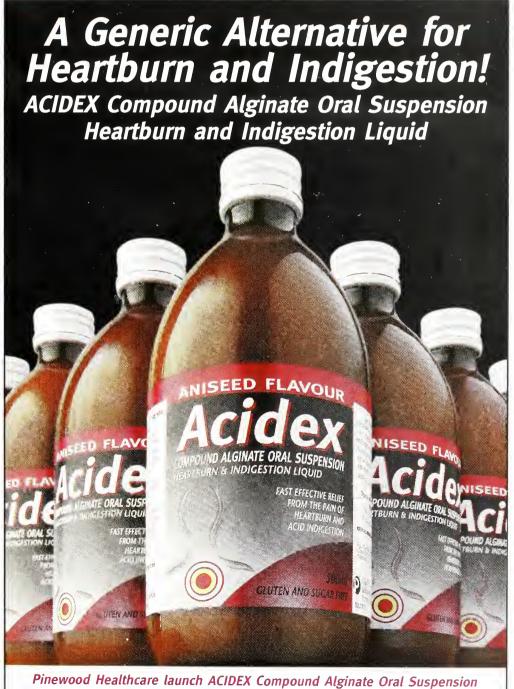
THE NEWSWEEKLY FOR PHARMACY



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Scottish health plan 'delights' pharmacy

Relenza PGDs not likely to be ready to ease GP flu workload Consumers back EHC drive for pharmacy How was it for you? asks our Y2K review Pharmacy2U raises concerns about script reimbursement



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THE NEWSWEEKLY FOR PHARMACY

VOLUME 254 No 6271 141st YEAR OF PUBLICATION ISSN 0009-3033

REGULARS											
News	4	Counterpoints	10								
GP Perspective	7	Statutory Committee	18								
Topical Reflections	7	Business News	24								
Medical Matters	8	Classified Advertisements	27								

COMMENT

hile pharmacists in England greeted the Government's programme for pharmacy with mixed feelings, pharmacists north of the border are more enthusiastic about the Scottish NHS plan published last week (*C&D*, p4).

Their optimism may be because the Scottish plan does not put forward a detailed pharmacy strategy or controversial new contract proposals. Instead it gives many "signposts to change" and encourages the professions to work together with NHS officials in deciding the best way to implement new services. So, although pharmacy has few specific mentions, the plan incorporates all the profession's ideas for "improving the patient's journey through the NHS" – such as repeat prescribing, medication review and prescribing for minor ailments. And there are several other opportunities for pharmacists to be involved in the plan's 259 action points, many of which strive towards achieving a health rather than an illness service.

Likewise, there is little mention of resource allocation, other than the promise of record spending on the health service as a whole. The plan pledges to address manpower issues in pharmacy and to reward NHS staff fairly for their contribution, but there is no indication what pharmacists can expect in terms of funding. It is now up to the pharmacy organisations to pursue the opportunities available.

The document says: "Change happens where people at the front line are given the responsibility, the freedom, the skills and resources to do a better job." So far Scottish pharmacists have had a sympathetic hearing from their health minister. Let's hope this momentum continues and they are given 'the responsibility, freedom and resources' to prove their worth in 2001.

Scottish health plan 'delights pharmacy'

The Scottish Executive plans to make better use of pharmacists, according to the NHS Plan for Scotland

Relenza PGDs in short supply

Hopes are slim that Relenza supplied under PGDs could ease the pressure on GPs this winter

Bills will need pharmacists' help 6

Beverley Parkin (r) argues that legislation in Parliament will boost pharmacists' involvement in healthcare

Consumers back EHC drive in pharmacies

At least one anti-abortion group plans to picket pharmacies over EHC, but there is little public sympathy for this stance, the Mintel report reveals

Pharmacy sales winners 2000

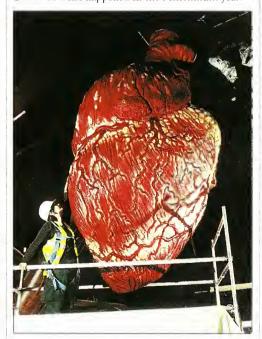
Market analyst Information Resources reviews the top sales categories in pharmacies this year

Complementing the conventional

A House of Lords Select committee report on complementary and alternative medicine has made recommendations on its organisation and regulation

How was the year 2000 for you?

Clocks didn't stop and planes didn't fall out of the sky when the chimes of Big Ben ushered in the year 2000 - so what happened in the Millennium year?



A watery success in South Dakota

While in the US, Godfrey Hall came across an unusual pharmacy in the middle of nowhere

P2U considers impact of NHS prescriptions

UK-based online business Pharmacy 2U has admitted to concerns about expanding its NHS business, but feels it can cope

Laser eye treatment at Boots

Boots Opticians has brought the latest in laser eye treatment to its store in London's Regent Street

Out & About: The Elephant Pharmacy's child

Felix Corley visits a thriving new pharmacy in the ancient Norwegian port of Bergen



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United Business Media







Scottish NHS plan favours pharmacy

The Scottish Executive aims to make better use of pharmacists and pharmacies in the NHS Plan for Scotland published last week.

"We will work with the pharmaceutical professions in Scotland to address manpower issues and develop a strategy for pharmacy," says 'Our national health: A plan for action, a plan for change'.

The Executive wants to build on model schemes for pharmaceutical care that are already in place for palliative care, older people and people with mental illness. These schemes will be extended to include chronic conditions and new arrangements will allow pharmacists to prescribe a broader range of medicines, conduct medication reviews and monitor certain treatments.

"We will improve the provision of repeat medication and support this by developing electronic transmission of prescriptions and better information exchange," says the document.

After a year of consultations and debate, 'Our national health' sets out radical plans to rebuild the NHS.

Record spending will see the health budget increase from £4.9 billion in 1999-2000 to £6.7bn in 2003-04. Every

All NRT available on FP10 next year

All nicotine replacement therapies could be available on prescription in England and Wales in the New Year, depending on the outcome of a consultation announced by the Department of Health. In Scotland, a four-week consultation on the issue was also announced last week.

The DoH says the policy change has come about because of the increasing evidence of the clinical and cost-effectiveness of NRT. The cost of treating tobac co-related disease has been estimated at between £1.4-1.5 billion and the cost to the NHS of full courses of NFT could be £80-100 million.

The products which may be as seed from Schedule 10 (the black manachet Nicobrevin, all Nicorette Manachet Schedule Microstrell gum and manachet about the production of the America Glasspool, and the Manachet Ma

or reising and Protest reading last lagislation seeks to a Hoternet adverects, and will end oring events. NHS Health Board will receive an increase in funding of at least 5.5 per cent in 2001-02, twice the current rate of inflation.

The following is a summary of the main aspects affecting pharmacy.

Section 2. Improving health

The new Health Improvement Fund will use money from tobacco taxes to invest over £100m between 2000-01 and 2003-04, with particular emphasis on Social Inclusion Partnership areas.

Plans include:

- banning tobacco advertising
- consultation on making all nicotine replacement products available on GP prescriptions
- rolling out best practice in smoking cessation services
- measures to ensure the prudent use of antibiotics.

3. Rebuilding our NHS

Core aims are to set national standards to be delivered locally, increase accountability, streamline bureaucracy and integrate decision-making.

Health Boards and Trusts will be brought together in 15 new unified NHS Boards, each responsible for all NHS services in their area. A single Local Health Plan will replace the Health Improvement Programmes and NHS Trust Implementation Plans.

Work with the Health Technology Board for Scotland and local area drug and therapeutic committees aims to remove inequities in prescribing.

4. Improving the patient's journey Plans include:

- working with the NHS and professional bodies to ensure that all patients can get access to an appropriate member of the primary care team within 48 hours
- helping primary care professionals to expand roles and responsibilities and build integrated teams, freeing GPs to spend more time with those who really need their clinical skills
- working with the professions to identify the workforce planning, training and job content implications of changing roles in primary and intermediate care
- increasing the number of nurses trained to prescribe and the range of medicines they can prescribe
- a £50m investment in IT over this year and the next two years will speed up integrated patient records in GP practices and health centres, electronic transmission of prescriptions between GPs and pharmacists and connecting all primary care staff to NHSnet.

5. Involving people

Steps will be taken in 2001 to develop the Patients' Project, an assessment of patient information across Scotland which will disseminate best practice and provide a national source of advice.

- By April 2003 patient-held smart cards will be evaluated where they are most likely to promote better co-ordination of care.
- A network of information access points will help people find information on care and treatment options.

6. A lifetime of care

Children and older people will have priority. Information and support will be offered to women of child-bearing age and their partners, so they can make the best choices about diet, alcohol, lifestyle and drugs to help prepare them for healthy pregnancy. The target is for 50 per cent of mothers to be breast-feeding by 2005.

Health education in schools will help pupils make healthy choices on alcohol, smoking and drugs. The Health Education Board for Scotland is developing a campaign tailor-made to the health education needs of older people.

7. Meeting specific needs

The clinical priorities are coronary heart disease, cancer and mental health.

By 2001, the CHD task force will produce a national plan, encouraging a healthy lifestyle, and tackling smoking, high blood pressure and high cholesterol. Mental health services in primary care settings will be developed further.

8. Partnerships with staff

"We are determined that [NHS staff] should be rewarded fairly for the contribution they make.

"Pay modernisation is essential if staff are to be successful in creating more flexible roles reaching across traditional barriers."

Favourable reaction

Scottish pharmacy organisations have welcomed the opportunities offered in the plan and look forward to helping develop a pharmacy strategy. George Romanes, chairman, Scottish Pharmaceutical General Council, said: "Unlike the English plan, the Scottish plan is not prescriptive. There is some leeway to allow the Scottish Executive and the NHS to work out the option best for the patient, but one that is also deliverable in day to day practice."

He thought it significant that health minister Susan Deacon had described GPs as traditional gatekeepers to the NHS but said that, in future, there would be a range of gateways.

"The plan puts forward an ambitious number of changes, but these offer the profession a chance to grow and develop in a number of areas. SPGC will strive to make the best of the opportunities that the plan gives to pharmacy in Scotland."

Alison Strath, chairman of the Royal Pharmaceutical Society in Scotland, said: "I am delighted that the Scottish Executive recognises the role the profession can play in improving the quality of the patient journey through the NHSis."

The plan, she added, gave all health professions a sound framework on which to develop new services and work together in improving patient care.

"Pharmacy will work with the other professions to play its part in this process," she said.

The Guild of Healthcare Pharmacists' president, Helen Remington, welcomed the extension of model schemes for pharmaceutical care, the support for pharmacists in prescribing a broader range of medicines, and investment in training and development of NHS staff.

The Guild agrees that hospitals should meet patients' expectations of a safe and comfortable stay, by having the highest possible standards of service. It points out that clinical pharmacists on wards have a vital role in ensuring medication is safe for patients.

NHS 24 will be Scotland's 'NHS Direct'

Scottish pharmacists will be working to ensure that community pharmacies are included as the 'fourth disposition' from the start of Scotland's pilots for NHS 24, a telephone advice service for patients.

Over the next three years, £36 million will be invested in the nurse-led service that will be rolled out in pilot areas during 2001. In future, the service may be expanded to create NHS 24 Online, which would provide information on health and health services via the internet and digital television.

Announcing the launch of NHS 24 last week, Scottish health minister Susan Deacon said: "While the new service is similar to NHS Direct in England there will be a greater emphasis on integration into existing services. That will include GP out-of-hours services, ambulance services and pharmacists."

Jim McIntyre, a senior director from Scottish Enterprise, is the new chief executive officer and will lead the design and implementation phase of NHS 24.

GP leader offers support for pharmacists on PCT Boards

GPs should be more welcoming of other health professionals on the primary care trust boards, Dr John Chisholm, chairman of the British Medical Association's GP committee, has indicated.

At the All-Party Pharmacy Group annual meeting last week, he said that the arrangements of two years ago, relating to the composition of primary care group boards, "were necessary at the time to win the GPs' confidence". "As PCGs move into PCTs," he said, "what's important is to get all the professions working together. At a level four PCT, it's vital that on the executive all the professions have a say."

The introduction of PCGs had raised concerns among several health professions, particularly pharmacy, as the then health minister, Alan Milburn, had suggested that PCG boards comprise 13 members, of which GPs should be in the majority with seven

places, and nurses would have a lesser representation. His guidance did not give other professionals such as pharmacists places as of right.

Royal Pharmaceutical Society president Christine Glover endorsed the need for high-level pharmacy input to PCTs. "If you do not have any pharmacist input at the top level, you do not understand what pharmacy can bring to the agenda," she said at the APPG meeting.

IN BRIEF

Drug alert

Janssen-Cilag is recalling a batch of Haldol Liquid (haloperidol) 2mg/ml 100ml due a number of packs containing insoluble matter introduced during packaging. The affected batch is batch number 99JB942, expiry October 2004. The Class 2 alert was issued on December 14. Further information is available from Janssen-Cilag on 0800 731 8450.

Fees for PGD prescriptions

Rules allowing for charges to be collected for drugs and appliances supplied in accordance with patient group directions on the NHS came into force on December 11. The NHS (Charges for Drugs and Appliances) Amendment (No2) Regulations 2000, (Statutory Instrument 3189; ISBN 0 11 018887 X; £1.75) are available from the Stationery Office.

BP 2000 in force

The 'British Pharmacopoeia 2000' came into force on December 1. This BP (ISBN 011322320x) costs £750 or £771.88 including VAT for the CD and is available from the Stationery Office. The 'BP 2001' will be published in May 2001.

Scottish nurse prescribing

Legislation relating to charges and exemptions from fees for prescriptions issued by nurse practitioners in Scotland came into force on December 1.

Not enough Relenza PGDs will be in place to ease flu pressure

Government and doctors' hopes that pharmacists and nurses supplying zanamivir (Relenza) under patient group directions will help to ease pressure on GPs this winter may be foundering.

NHS regions in England are suggesting that few, if any, health authorities will have Relenza PGDs in place by mid-January, the time the flu season is predicted to reach problem levels. As time is tight, especially with pharmacists needing to be trained in the Christmas rush, there is an acceptance that most health authorities will not be able to make use of Relenza PGDs until the next flu season. For this year, HAs will have to manage with only GPs prescribing zanamivir.

GPs have already expressed concern about increased workloads, with predictions that during periods when flu is widespread GPs could have as many 75 extra consultations each week.

The British Medical Association's GP Committee guidance on Relenza supply says that the DoH has determined that zanamivir can be supplied by health professionals without a GP consultation or a doctor's prescription "to attempt to ease the burden on GPs".

Northern and Yorkshire Region pharmaceutical advisor Dr Jim Smith, soon to become chief pharmaceutical officer at the DoH, said on Tuesday that the workload will be an unknown quantity. He was aware of one large HA where GPs had decided they did not want to have PGDs as they were not confident PGD training could be satisfactorily completed in time.

"It's important that at risk individuals do have access to treatment," he said. "As far as this region is concerned, we are only looking at a minority of HAs using PGDs. But as a region, we must ensure there is access to this treatment."

While decisions to implement PGDs should be taken at a local level, if they are not adopted patients must be able to see a doctor within 48 hours and be able to get a prescription, he said.

Claims that NHS Regions had instructed health authorities to put PGDs in place for January were rebutted. Another regional pharmaceutical officer said that no such direction had gone out as it is up to health authorities to decide whether implementation is appropriate in their area.

One pharmaceutical advisor told *C&D*: "My feeling is that only a small health authority will actually feel that implementing a PGD for this flu season will be practicable." Health authority advisors met after the Relenza guidance was issued and were "virtually unanimous" that PGDs would not be possible for this flu season.

He warned: "The risk for pharmacy

is of doing it in a hurry and getting it wrong and queering the pitch for future PGDs."

The Scottish Executive issued its own flu drug guidance last week. PGD legislation has yet to be introduced there, but otherwise the guidance makes similar recommendations to the advice on use of zanamivir given in England. Immunisation remains the first line of defence against flu for at-risk groups, while non at-risk individuals will not benefit from the new treatment.

A spokesman said this week that the Scottish Executive hopes that nurses and pharmacists will be able to give appropriate advice and help identify those patients who are most in need.

Minister acknowledges raised pharmacy profile

The Health Minister Lord Hunt last week praised the success of the All-Party Pharmacy Group which, he said, gave an impressive opportunity to raise pharmacy issues in Parliament.

"It has long been my own contention that the role of pharmacists in the health service has not been fully recognised," he told the group's annual meeting in London (C&D last week, p5). The NHS programme for pharmacy was an opportunity to put this right, and the All-Party Pharmacy Group was a way to maintain momentum.

Pharmacists would be at the forefront of new medicines management services, he said. The Department would soon be inviting formal bids for 20-25 health authorities, primary care groups or trusts to develop the first wave of medicines management pilots. Pharmacy in the Future' proposed that the Department's new Medicines Management Action Team would identify local health authorities and PCTs with the capacity to develop good ideas and offer them extra support, as well as supporting a national pilot trial based in community pharmacies. On possible new contract proposals, Lord Hunt said it was as much in the profession's interest as the Department's to tackle outdated restrictions. The Department was still 'in thinking mode' about pharmacy consortia and he did not wish to commit himself further at this stage.

The Government wanted to give incentives to pharmacies to provide quality services, he continued.

Lord Hunt went on to thank pharma-

cists for carrying out point of dispensing checks – another example of what the profession could do to help the NHS as a whole. Pharmacists would also have a key role in easing winter pressures. A radio campaign advising the public to consult a pharmacist for colds and flu would change in February/March to give important health messages to young men. These campaigns would drive home to the public 'just what pharmacists have to offer'.



Health minister Lord Hunt (left) and All-Party Pharmacy Group chairman Dr Howard Stoate MP at the APPG annual meeting last week in Portcullis House, Westminster

Profiteering slur made over EHC price

The price of Levonelle onorgestrel), the soon-to-be OTC morning-after pill, came under fire in last week's Mail on Sunday amid accusations of profiteering.

The article's headline said: 'Chemists to collect £10 for over the counter sales of morning-after pill'. It went on to say that critics of the move believe the drug is overpriced and questioned how prepared women will be to discuss their sex lives in a busy shop.

National Pharmaceutical Association director John D'Arcy felt the newspaper article painted pharmacists unfairly as the villains, when the 'POM to P' switch has had the support of the Government, manufacturer Schering and the Medicines Control Agency.

We are being accused of profiteering when we are not," he told CED. "There is a need to ensure it is supplied safely and effectively and this takes time. The fee has to recognise the professional input.

However, he repeated the NPA's preferred option of making EHC free at the point of delivery. While patients can obtain EHC free from a GP or clinic, it creates a two-tier service if they have to pay £20 when it is supplied through a pharmacy, but not under a patient group direction. "The overall issue is that [EHC] should be free at the point of delivery," he said. "We are going to have this inequity. It's postcode prescribing and it creates a barrier to access when [the Government] is trying to increase access."

A Schering spokesman said that the company had undertaken pricing research and the proposed retail price appeared to be correct. As well as reflecting the costs of setting up additional patient support and education, it was also seen to be set at an adequate level to discourage inappropriate use. Levonelle will retail at £19.99, with a wholesale price of £9.40.

Andy Murdock, pharmacy superintendent for Lloydspharmacy, said: "£10 is not an unreasonable fee for the 15 minutes' counselling that the pharmacist must provide before the product can be sold." Pharmacists taking part in the EHC PGD pilot in Manchester's Health Action Zone receive a £10 fee for each consultation.

Answering concerns that the introduction of pharmacy status EHC would discourage the supply via PGDs, Dr Jim Smith, chief pharmaceutical officer in waiting, said he had no evidence that this was happening. In his current role, as Regional Pharmaceutical Adviser for Northern and Yorkshire Region, he said: "As a region with high levels of teenage pregnancy, we are actively encouraging the introduction of PGDs for the supply of EHC. There is too much of a policy drive behind sexual health and teenage pregnancy for HAs not to supply it under PGDs.

"Our view, and the DoH's view, is that the introduction of Levonelle is a simple reclassification along with all the other 'POM to P' switches. It is not part of the Government's teenage pregnancy strategy but another way which women who are prepared to pay for it will value."

In a move that may affect the 'POM to P' switch, the Conservative party confirmed on Wednesday that they will be calling for a vote on the POM Amendment Order laid before Parliament last week. Although this unusual move will mean that MPs will now have to debate the issue, the Statutory Instrument can still take effect, said a party spokesman. In the unlikely event that the Conservatives were to succeed, Levonelle would be reclassified as a POM.

Pharmacists are being encouraged to promote the new NHS Pregnancy Smoking Helpline this Christmas and New Year. This new service is in addition to the established NHS Smoking Helpline. TV advertising, which began this month with the 'Don't give up giving up' theme, will run through to No Smoking Day on March 14. Pharmacists may order posters and leaflets via the NHS Smoking Helpline on 0800 169 0 169 or at www.givingupsmoking.co.uk. **NHS Pregnancy Smoking** Helpline: 0800 169 9 169



Bills will need pharmacists' help

The last legislative programme of the current Parliament will boost pharmacists' involvement in healthcare, argues Beverley Parkin, director of public affairs at the **RPSGB**

The year may be drawing to a close, but the Westminster political calendar has only just got under way.

Now that the Queen has announced a programme of legislation, ministers have been quick to issue press releases and consultation papers showing activity and momentum. It is important for them, and for the opposition parties, to display ideas and to promote actions in a political season which is likely to be dominated by a General Election in the spring.

As predicted, the legislative programme itself seems fairly short. However, there are two Beverley Parkin health-related Bills to be debated. The first

brings back the issue of tobacco advertising and will propose legal backing for the ban to which ministers have long been committed. The second will address parts of the Government's modernisation agenda, legislate for some of the findings of the Royal Commission on Long Term Care and seek to make progress on outstanding proposals for prescribing by health professionals. Both Bills will have implications for the profession.

For community pharmacists in particular, the role of smoking cessation programmes is likely to be on the agenda as the Government seeks to portray a ban on tobacco advertising as part of a wider public health drive on smoking. Pharmacists have already proved themselves to be successful cessation advisers, undertaking a range of public health roles from informal counselling to active pharmaceutical support.

In the Bill on NHS reforms, it is probably the new prescribing role that will interest pharmacists most. The Bill plans to implement the major recommendations of the Crown review of prescribing, supply and administration of medicines. It will grant new powers to prescribe to pharmacists and to some other health professionals, such as physiotherapists, in limited circumstances. Once the new law is enacted, there is likely to be a mechanism established to grant new or additional prescribing powers to these and other professions without the need to wait for a new legislation.

The Society has long supported an expansion in the prescribing role of pharmacists as part of a series of measures designed to better serve the public and position the profession more centrally within overall healthcare provision. There will still be some way to go, even when the new provisions are enshrined in law, but the Bill will be an important next step along the way.

And the Government took another important step recently when ministers approved the reclassification of emergency hormonal contraception as a pharmacy medicine. As expected, the decision provoked much comment in the media and Parliament, as well as within the health professions and interested third parties. In the House of Commons, MPs divided with some expressing regret at the decision and others, the majority of those who have made their views known, welcoming this new role for pharmacists.

One of the most interesting comments came from the British Medical Association, which welcomed the decision but would have liked it to have gone further. The BMA wanted this form of contraception to be available free – mirroring the Society's policy and views expressed by other pharmacy organisations

The Society has adopted a proactive stance in the debate over EHC, believing that pharmacists have a major contribution to make in this and other areas of contraception and sexual health. Now, ministers clearly share that view and the profession has a unique opportunity to demonstrate its professional commitment.



GP PERSPECTIVE

Ring in the change

Big changes are planned in the way that out-of-hours calls are handled. A report, recently published with full government approval, heralds a dramatic change in the service. This will have contractual and financial implications for GPs, who currently have a 24-hour responsibility for patient care.

The telephone helpline, NHS Direct, will be the nerve centre of the new out-of-hours service, which is intended to go live in 2004. Its call takers will decide what action to take and whether the patient needs emergency treatment. NHS Direct will need a much-improved infrastructure to cope with the potentially huge demand.

The changes go deeper than this as there will be financial implications for GPs. The payment that they receive for visiting a patient outside normal hours will no longer be available. However,

"Communication between concerned parties will have to improve"

the contractual responsibility for 24-hour care could end up with an approved organisation (such as a cooperative or deputising service).

In addition, all out-of-hours services must achieve certain quality standards, some of which are quite tough. On the surface these changes seem sensible, with a single national contact number and nationally approved standards.

If GPs will somehow become more distantly removed from out-of-hours responsibility, exactly how will the legal responsibility be split up? Communication between concerned parties will have to improve.

Bigger issues abound, such as will NHS Direct be able to handle large volumes of calls, especially in peak times? GP services also have had problems in dealing with high demand, but since NHS Direct is government-backed, this could become politically sensitive.

Issues such as payment for doctors doing the out-of-hours work are not clear and this could cause problems. In addition, there is a shortage of doctors, current payment for performing out-of-hours work is far from great and the unsociable hours are not popular with everyone.

Yet this review has the potential to improve a service which needs to be better. It will take money to set up and maintain, but the outcome should be very interesting.

Dr Harry Brown is a GP practising in Seacroft, Leeds



GPs may delay the launch of PGDs

The National Institute for Clinical Excellence may have had a change of heart on the prescribing of 'Relenza' but that does not mean to say that at risk patients will have it prescribed. And the Department of Health's additional suggestion that one route for supply could be by Patient Group Direction through community pharmacies has possibly even further hardened the attitude of many GPs.

Certainly that seems to be the message from the mid-Devon group of GPs who not only disagree with NICE's estimate of efficacy but also consider its supply by pharmacists or nurses to be a threat to their monopoly on prescribing (Guardian December 11).

Now bearing in mind the short time scale between developing influenza symptom and having to use Relenza it is probable that many Primary Care Groups will take the same decision as mid-Devon but the fact that some GPs see PGDs as a threat to their monopoly on prescribing is a worrying development.

To some enlightened GPs, PGDs are a welcome opportunity to provide a public service while lightening their workload, but to others they are another threat by pharmacists to usurp their dominance.

In many PCGs, GP opposition may make it impossible to introduce PGDs so the challenge will be for the Department of Health to positively encourage their introduction while still allowing hem autonomy of action. Bearing in mind the controls that have been introduced to ensure their local applicability that may well prevent their short-term introduction in many parts of the country.

Need guidance to initiate 'Pharmacy in the Future' plan

Normally at this time of the year the world of pharmacy is not alone in



appearing to close down until the middle of January. But this year is different. Since the NHS Plan and Pharmacy in the Future were launched development activity has been intense and I am being constantly bombarded with initiatives and predictions of what the future will hold for me.

Just in this week (and this is only one week before Christmas) three major issues issues came to the fore; the Government introduced regulations to enable Levonelle-2 to become a 'P' medicine within a few weeks; prescribing for pharmacists made a huge leap forward with its mention in the Queen's Speech; and the Health Minister Lord Hunt threatened early action on the out-of-hours, e-prescribing and medication management initiatives from 'Pharmacy in the Future'.

All breathtaking stuff that promises to make 2001 a real watershed in the development of community pharmacy.

But a word of advice from the shop floor to all those committees and their new-found enthusiasm.

As a simple community pharmacist, working under intense pressure, I need guidance and leadership. I am offered tantalising glimpses of a bountiful future – but on the detail of

how to achieve this Utopia there is very little.

I am still working to the old global sum, treating every one as an average supply-based contract and am seeing my profitability decrease with every annual settlement. I can see no future for using this outdated method of payment as a basis for developing service, but so far have heard no constructive suggestions on how it could be replaced. All I hear are the predictions of rapid change and I am worried.

I am still a private businessman with commercial responsibilities who contracts his service to the NHS. I am enthusiastic to change to pharmaceutical practice based on service, but I need to know my new responsibilities.

I need details of training courses, I need a new contract and I need financial stability. But above all I need information and clarity. I need to plan for the future and at the moment I cannot. The year 2001 may be just around the corner but my future is still shrouded in uncertainty.

My New Year message to the politicians must be a plea to stop talking in riddles and show me a clarity of purpose. My message to my community colleagues. Have a happy Christmas and a rewarding New Year.

Medical matters



Specialist services help over 4,000 smokers quit

Over 4,000 people stopped smoking between April and June using new specialist smoking cessation services.

About 12,000 people set a 'quit date' over the period. Of these:

- 65 per cent' received free NRT
- 62 per cent were female
- The specialist services are usually clinics, run by smoking cessation specialists, offering intensive treatment in the form of group support for five or six weeks as well as picotine replace.

23 per cent were over 60 years old.

six weeks as well as nicotine replacement therapy, which is free for people exempt from prescription charges. Most of the activity (3,500 successful quit attempts) occurred in Health

Action zones.
All health authorities in England will

have specialist smoking cessation services in place by the end of March.

IN BRIEF

Xylocaine and Tenif are back

AstraZeneca expects normal supply of Xylocaine with adrenaline to resume during April and Tenif to be available by March.

Boehringer Ingelheim. Tel: 01344 424600.

Dovonex goes large

Leo is launching a 240g pack of Dovonex ointment in February. The basic NHS price will be £56.16.

Leo Pharmaceuticals Ltd. Tel: 01844 347333.

Mintec gets Shire livery

Mintec capsules have been repackaged in Shire Pharmaceuticals' livery. There is no change to the product. Due to an error, the first two batches are marked POM. Subsequent batches will be correctly labelled.

Shire Pharmaceuticals Ltd. Tel: 01264 333455.

A sweetener from Juvela

Juvela has launched a gluten-free sweet biscuit. It is available on prescription, priced at £13.60 for 6x150g. The company has also repackaged its entire range of gluten-free products.

SHS International Ltd. Tel: 0151 228 8161.

HRT cuts coronary disease

Hormone replacement therapy decreases the risk of major coronary events in women without previous heart disease. However, higher doses of oestrogen and combination therapy have been linked to an increased risk of stroke.

A study has shown that current HRT users have a relative risk of 0.61 for major coronary events compared to those who have never used it. Among women taking oral conjugated oestrogen, the risk was similarly reduced for

those taking 0.625mg daily (relative risk of 0.54) and 0.3mg (0.58).

The risk for stroke was increased among women taking 0.625mg or more of oestrogen (relative risk 1.35), and those taking oestrogen combined with progestogen (1.45). Overall, there was little relationship between combination hormone therapy and risk for cardiovascular disease (major coronary heart disease plus stroke).

The prospective, observational

cohort study, which was published in the *Annals of Internal Medicine*, followed 70,533 postmenopausal American nurses between 1976 and 1996. This group suffered 1,258 major coronary events (non-fatal myocardial infarction or fatal coronary disease) and 767 strokes.

HRT use was ascertained from biennial questionnaires. Cardiovascular disease was identified with a questionnaire and confirmed by medical record review.

Rivastigmine improves Lewy body dementia

Rivastigmine has been shown to improve symptoms in dementia with Lewy bodies.

A randomised controlled trial of 120 patients showed that those taking rivastigmine were significantly less apathetic and anxious, and had fewer delusions and hallucinations than those taking placebo. Almost twice as many patients on rivastigmine (63 per cent) than on placebo showed at least a 30

per cent improvement from baseline.

In cognitive and neuropsychological tests, rivastigmine patients were faster and better than those on placebo. After drug discontinuation, differences between the two groups disappeared. Safety and tolerability of rivastigmine were judged to be acceptable.

Patients were given up to 12mg rivastigmine daily or placebo for 20

weeks, followed by three weeks rest. Assessments were done at baseline, and after 12, 20 and 23 weeks. The study was published in *The Lancet*.

Dementia with Lewy bodies accounts for 15-25 per cent of dementia presentations. This group poses a considerable therapeutic challenge because neuroleptic drugs can provoke severe, irreversible and often fatal sensitivity reaction in this type of dementia.

Coffee drinking may protect smokers against the risk of bladder cancer

Coffee may offer protection against bladder cancer in smokers, according to a study.

The study found that bladder cancer risk was more than doubled among smokers who do not drink coffee compared to smokers who do.

There was a plateau in the risk at above ten cigarettes per day for both coffee drinkers and non-coffee drinkers.

Data came from a 12 centre case control study. All new cases of bladder cancer between 1985 and 1986 and all those diagnosed between 1983 and 1984 were included (497 patients). All patients were matched with one hospital and one community control.

Interviews, including taking a complete history of coffee and tobaccouse, were carried out at patients' homes. Those who drank fewer than two cups a day were defined as noncoffee drinkers.

Authors of the study, which will be published in the *Journal of Epidemiology and Community Health*, suggested that coffee's protective effect may be due to caffeine introducing the cytochrome P4501A2.

This enzyme's activity may be related to bladder cancer risk through metabolic activation of aromatic amines and production of compounds that lead to formation of DNA adducts.

Licences for Mintec and Equilon Herbal amended

The Medicines Control Agency has requested that the licences for Mintec and Equilon Herbal should be amended.

The products' SPCs and PfLs now warn that a doctor should be consulted before self-medication begins. A doctor should be consulted if the patient is over 40 and it is some time since their last attack.

Other symptoms requiring a GP consultation include blood in the stools, nausea or vomiting, loss of appetite or weight or difficulty passing urine.

If the patient has recently been abroad or is pregnant, they should also consult their GP. If the symptoms do not improve within two weeks, medical advice should be sought.

Pharmacyupdate

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- Northern Ireland pharmacists enrolling for Update until the end of February will have their registration fee paid by the NI Centre for Pharmacy Postgraduate Education & Training
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- If you need more information, call Mary Prebble on 01732 377269



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Northern Ireland pharmacists registering under CPPET scheme tick box

Send this completed form to Mary Prebble, Chemist & Druggist, United Business Media International Ltd, Sovereign House, Sovereign Way, Tonbridge, Kent TN9 1RW.



Counterpoints



Canesten rings in the New Year on TV

Bayer is supporting its Canesten Once thrush treatment with a £1.2 million TV advertising campaign in the New Year

The campaign follows the brand's humorous 'life's irritations' theme but focuses on the benefits of treating the infection directly where it's needed.

The commercial is set in a moonlit room in a holiday setting. It features a sleeping woman with the faint but unmistakable buzzing of a mosquito.

As the buzzing gets louder, we hear 'thwack' as the woman deals with problem. The message is that if you have a problem, it is best to deal with it directly.

The campaign will be screened on ITV, C4, C5 and satellite. It will be on air from Boxing Day until February 18. Bayer Consumer Care.
Tel: 01635 563000.



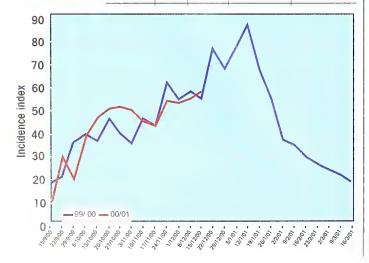
Cough, cold & flu FORECAST

Information	
updated weekly	
by SDI	

SPONSORED BY



,	United Kingdom	Status level	Number of weeks on status	Season 2000/2001 projected population affected by respiratory illness	2000/2001 vs. 1999/2000 cumulative season-to-date % difference
,	BIRMINGHAM	Alert	1 week	209,807	12.74%
	BRISTOL	Pre-Alert	2 weeks	38,235	19.65%
	GLASGOW	Pre-Alert	3 weeks	57,249	32.04%
	LEEOS	Alert	1 week	141,946	15.08%
	LONOON	Pre-Alert	4 weeks	782,305	-2.12%
	MANCHESTER	Pre-Alert	2 weeks	259,164	1.64%
)	NEWCASTLE	Alert	1 week	31,348	-5.71%
	NORWICH	Pre-Alert	4 weeks	10,984	-2.35%



Aloclair for mouth ulcers

Sinclair Pharmaceuticals is launching a new mouth ulcer treatment in the UK

Aloclair was developed by US company Propharma. It is formulated for people who suffer from mouth ulcers or other painful oral lesions including ulceration due to poorly fitting dentures.

The product is suitable for people who are predisposed to aphthous ulcers such as those suffering from

problems due to xerostomia (insufficient saliva production).

It forms a protective covering over the lesion which minimises further irritation (eg from spicy or salty foods).

The user should rinse 10ml of the product around the mouth for about a minute.

Retail price is £8.95 for 120ml. Sinclair Pharmaceuticals Ltd. Tel: 01483 860699.

Rennie gets the credit at Christmas

Roche Consumer Health is sponsoring ITV's festive line-up of programmes with its Rennie indigestion remedy.

Rennie credits will top and tail a wide range of programmes over the Christmas holiday period, including 'Stars in the Eyes' and 'Close & True'.

The humorous Rennie credits

depict various scenes of family overindulgence at Christmas. The original Rennie peppermint flavour pack is featured on each credit.

The sponsorship will run until December 30.

Roche Consumer Health, Tel: 01707 366000.

If you'd lather, say it with soap

Bronnley is launching a new range of celebration boxed 100g soaps in January.

The range comprises three boxes that each spell out a message - Happy Birthday (Lavender soap), Thank You (Apricot and Almond soap) and With Love (Pink Bouquet soap).

The retail price of each box is £2.95.

H Bronnley & Co Ltd. Tel: 01280 702291.

Motilium 10 campaign is on the hop

Johnson & Johnson MSD Consumer Pharmaceuticals is supporting its Motilium 10 with a nationwide PharmaSite campaign until the New Year.

A festive frog depicts the sick or queasy feelings and heavy bloated stomach symptoms often experienced after too much eating or drinking.

The campaign aims to highlight the benefits of taking Motilium 10 to ease these uncomfortable stomach symptoms after too much Christmas cheer.

A smaller poster is available for pharmacies without PharmaSite.

Johnson & Johnson.MSD Consumer Pharmaceuticals. Tel: 01494 450778.



ON TV NEXT WEEK

Alka-Seltzer: All areas except G, CTV, W, TT, GMTV, TSW

Aquafresh toothbrush: All areas except U, CTV

Askit: GTV, GMTV, C4, C5

Bassett's Soft & Chewy Vitamins: GMTV, C5

Beechams: U

Benylin: All areas

Breathe Right nasal strips: All areas except C4, Sat

Calpol: ITV, GMTV, Sat

Clinomyn toothpaste: GMTV, C4, C5, Sat

Covonia: U, C, A, HTV, W, M, GMTV

Gaviscon Advance: All areas Lemsip: All areas except CTV

Meltus: all areas except C4, GMTV

Nicorette: All areas
NiQuitin CQ clear: U

NiQuitin CQ: All areas except U, CTV

Panadol: U

Pro Plus: B, G, Y, TT, C4, C5

Rennie: All areas except CTV, C4, GMTV

Solpadeine: U

Pharmasite next week: Motilium 10, Anadin – Window. Motilium 10

- In-store. NHS Direct, Canesten Thrush Cream - Dispensary

A Anglia, B Border, C Central, C4 Channel 4, C5 Channel 5, CAR Carlton, CTV Channel Islands, G Granada, GMTV Breakfast Television, GTV Grampian, HTV Wales & West, LWT London Weekend, M Meridian, Sqt Satellite, STV Scotland (central), TT Tyne Tees, U Ulster, W Westcountry, Y Yorkshire

Counterpoints

Cosmetic changes ahead

Small and independent pharmacies will have fewer customers as more people buy health and beauty products from grocers over the next five years, according to a new report.

'Verdict Forecasts Health and Beauty 2005' predicts that changes in shopping habits will lead to grocers becoming the number one destination for health and beauty products.

"By 2005, grocers will account for 44.6 per cent of total health and beauty expenditure, while specialists will account for only 39.9 per cent. This is the reverse of the current situation," says Verdict.

"Losers will primarily be the smaller and independent operators who do not have the scale, and therefore buying power, to compete on price with the grocers or the major multiple specialists."

The report predicts that the future of health and beauty retailing in chemists revolves around providing a clearly differentiated offering from grocers. It points out that the pharmacy's biggest asset is its ability to offer practical advice to customers.

"Grocers simply cannot match the

intimate service and convenience that community—pharmacies—offer. Trust, credibility and reputation are essential in the purchasing decision for health and beauty and these still provide specialists with a real advantage.

"Local pharmacists need to exploit their position and grow their role within the wider NHS system. Treating minor ailments and giving advice that does not require a doctor's appointment will help strengthen the pharmacy's position in this competitive market at a time when the Government is looking to relieve some of the pressure on GPs by establishing primary care centres," says Verdict.

The report highlights the following plus' factors for health and beauty sales over the next five years:

- an ageing population
- increasingly young customers for products such as anti-wrinkle cream
- growth of the men's market
- more work for pharmacists under the Government's primary healthcare scheme
- more specialist activities such as Boots' aromatherapy and dentistry offerings.



If customers feel a tad green after eating and drinking especially that little bit too much, recommend Motilium 10. It's the only OTC motility product that restores a normal stomach digestive rhythm. So if their stomachs get them down this Christmas give them the relief they need.



WIND THE SHEETING OF THE

Motilium 10. Gets stomachs back to work

Further information is available from Johnson Johnson MSD

Enterprise House Station Road, Eudwater, High Wyserube Bocking Fersions HPTO 9UF Motifier 10 miles it for the source solder stonach are amfort with as fullness, heaviness and bloating after meablugged Category P. Always and the stallet

early two thirds of adults believe that pharmacists should be allowed to prescribe emergency hormonal contraception without the need for a GP's prescription, according to a report by market researcher Mintel.

Its report - 'OTC/Prescription Medicines Retailing' - says 63 per cent of adults back the move, compared with 30 per cent who do not.

Eighty-two per cent of adults aged 15-19 years old backed pharmacists, whereas only 51 per cent of adults aged over 65 did so.

Wealthier respondents in the AB socio-economic class were also less keen on the idea: only 57 supported it, against 38 per cent who did not.

In contrast, the ratio for respondents in the D class was 75:18 in favour. The initiative was also more popular in the less prosperous regions, such as Yorkshire/north east England, where 73 per cent of respondents approved - only 20 per cent did not.

But in wealthy southern England, the comparable ratio was only 56:42 in favour.

Meanwhile, 63 per cent of adults believe that pharmacists should be allowed to issue repeat prescriptions. As with EHC, consumers attitudes tend to harden the wealthier they are. While the majority of lower income consumers backed pharmacists on this issue, only 50 per cent of the higher income respondents (AB class) were in favour, against 46 per cent who were not.

Not surprisingly, 53 per cent of respondents living in southern England - traditionally one of the wealthiest parts of the UK - backed the initiative, against 46 per cent who did not. The comparable ratio in Scotland was 67:33 in favour.

Overall, pharmacists' efforts to make themselves more accessible are paying off. This year 43.5 per cent of consumers consulted pharmacists first when they suffered from a complaint, nearly 5 percent more than in 1993. The number of consumers who turned to GPs first for remedies had fallen 5 per cent to 47.2 per cent.

But the news is not all good, as more consumers turn to supermarkets to buy non-prescription pharmaceutical and other pharmacy products. Twenty-nine per cent of consumers this year bought these products from supermarkets, up 14 per cent on 1993. The comparable figure for pharmacists fell II.3 per cent to 72.6 per cent.

In the OTC market, Boots the Chemists is marginally more popular with women than men, and with the At least one anti-abortion group will picket pharmacies over emergency hormonal contraception, but it will gain little sympathy from ordinary consumers, as the latest Mintel report reveals

Consumers back EHC drive in pharmacies

Main source of OTC purchases %

	May 1997	July 2000
Baats the Chemists	47	40
Independent pharmacies	15	15
Tesca	6	8
Superdrug	*	8
Llaydspharmacy/Hills	5	6
Sainsbury/Savacentre	3	4
Asda	2	4
Safeway	1	3
Other drug stares	1	1
Other chemist chain	2	1
Ca-ap supermarket	1	1
Dispensary at GP's surgery/haspital	1	1
Elsewhere	2	1
Newsagent/carner shop/canvenience stare/garage farecaurt shap	*	1
Samerfield/Kwik Save	1	*
Savers Health & Beauty	6	*

* less than 1 per cent Saurce: BMRB/Mintel

more affluent consumers. While its customers tend to be working and unmarried, its traditional strength in babycare also makes it popular among parents with toddlers.

"It remains to be seen whether Boots' popularity among young parents will be affected by its decision to withdraw from various leisure markets [eg children's toys] to focus on health and beauty," says the report.

Older, retired people tend to favour local independent pharmacies, but these are unlikely to be used for OTC purchases by those under 20.

Consumers with children aged 5-9 are most likely to buy OTCs from independent pharmacies, compared to other regions, these outlets are relatively popular in North West England, where they account for 23 per cent of OTC purchases, and in Wales/West/South-west England - 26 per cent of OTC purchases.

Nearly one quarter of Superdrug's OTC customers are under 24 years old, and it tends to attract those in the

lower socio-economic groups. London is the chain's strongest region.

Lloydspharmacy is particularly popular among the under 20s and the 55-64 year old groups in the lower socio-economic categories. Its customers are likely to be out of work or retired. The chain attracts 8 per cent of parents with children under five.

Independent pharmacies, however, are increasing their share of prescriptions. Between 1997 and 2000 their share of this market rose four points to 38 per cent. Mintel says that pharmacies have benefited from better marketing techniques and promoting the availability of their pharmacists for advice.

During the same period BTC's share rose I point to 24 per cent, Moss Pharmacy's share rose 2 points to 5 per cent, partly because it has acquired more stores, and Lloydspharmacy's share fell 1 point to 10 per cent.

Other pharmacy chains have seen their combined share fall four points to 4 per cent.

The supermarkets have also gained NHS customers, although from a very small base, because they have installed more in-store pharmacies during the period.

Older people account for half of prescriptions dispensed and they tend to favour independent pharmacies - 44 per cent of over-65 year olds say independents are their main source of prescriptions.

Consumers with children aged five to nine also tend to use independents, particularly during the 'school run'.

Only 17 per cent of the over 65s use BTC as their main source of prescriptions, even though 45 per cent of them buy most of their OTCs from the chain.

Moss Pharmacy appears to attract more than one fifth of respondents living in Scotland.

When choosing a pharmacy for dispensing prescriptions, 74 per cent of the survey's respondents opt for a convenient location, 51 per cent for a pharmacy they can trust to dispense prescriptions accurately, 34 per cent for pharmacy staff who can give information about the prescription medicines, 29 per cent for quick service/not waiting too long, 28 per cent for pharmacies that happen to be near where they are shopping, 24 per cent for friendly staff, and 20 per cent for convenient opening hours.

BTC's customers appear to place the greatest trust on its ability to dispense accurately. This may reflect the work BTC has done to ensure that each customer can see that each prescription dispensed is doublechecked.

While consumers primarily appreciate the convenient locations of independent pharmacies, they also like the friendly staff and the likelihood that the pharmacist will advise on cheaper alternatives to the medicines prescribed.

OTC/Prescription Medicines
Retailing', Mintel International Group,
price: £695.To order a copy call: 0207
606 6000.

Future of Community Pharmacists Group comes under review

The RPSGB's Community Pharmacists Group is being told to provide a more effective service to its members.

A suggestion that the group should be disbanded was rejected at the recent Council meeting Instead, the Group's committee will asked to look at how it can change and refocus its activities.

The debate over the Group's future follows an independent review carried out by Sir Duncan Nichol. He identified "a general consensus that the group was not currently making a sufficiently worthwhile or effective contribution either to the development of community pharmacy practice or in the representation of views and policy ideas to the Council".

Some CPG members felt that this was because they had been marginalised by the Society; others took the view that the group was not truly representative of community pharmacists.

Sir Duncan identified a need for community pharmacists to work more closely with primary care pharmacists in pursuit of integrated care. He recommended that renewed effort should be made to identify the common ground between community and primary care pharmacists.

For the future, Sir Duncan suggested possible options were to turn the group into a Community and Primary Care Pharmacists Group, or concentrate resources on supporting local pharmacy development groups.

His view was that retaining the status quo was not a viable option. "Unless it can be guaranteed a clearly defined and purposeful remit, particularly for practice development, the group has no worthwhile future."

- The chairmen of the Society's Scottish and Welsh Executives will in future attend meetings of the resource management committee. Since both executives are responsible for the implementation of Society policy in their respective countries, Council felt that they should be party to discussions on how the Society's resources are allocated and managed.
- Candidates for the post of editor of

the *Pharmaceutical Journal* are soon to be shortlisted.

- An amendment to the Society's Byelaws means that Council members can now be reimbursed for expenditure personally incurred in having to employ a locum pharmacist while engaged on Council business.
- The Society's practice research division is to commission a critical review of the literature relating to health promotion and public health in pharmacy. This will help in preparing practice guidance on health promotion and public health activity in community pharmacy.
- In 2001 the number of calculation questions in the pre-reg exam will increase to 20 from the current minimum of 15, and from 2002 candidates would have to achieve a score of 70 per cent in the calculations in addition to achieving the pass mark for the examination overall. A new syllabus for the Society's registration examination will come into effect in 2002. The new syllabus is to be disseminated immediately to pre-registration training stakeholders.



Three-attempts rule for pre-reg exam in the dock

The Royal Pharmaceutical Society's rule that applicants for membership are only allowed to sit the registration exam three times faces further legal challenges in 2001.

A High Court decision in July upheld the Society's position, but an appeal against the court's decision will be heard next year.

Rashida Shaikh, who had her third attempt at the exam in July 1999, is also waiting for permission to proceed with her case, but in the meantime is asking anyone else who has been refused RPSGB membership after failing the pre-reg exam three times to contact her at 96 Riverdale Road, Sheffield \$10 3FD (tel: 0777-5930-948).

• The RPSGB is to seek an amendment to the Byelaws to remove the possibility of candidates having a fourth attempt at the registration examination as from 2002. Candidates would, however, in very exceptional circumstances, be able to resit their third attempt.

The move had been agreed to in the spring, but put on hold pending the outcome of legal proceedings.



If customers have a 'lead weight in their tummy' feeling after eating and drinking, especially that little bit too much, recommend Motilium 10. It's the only OTC motility product that restores a normal stomach digestive rhythm, and it's only available from pharmacy. So if their stomachs get them down this Christmas give them the relief they need.

Motilium 10

DOMPERIONE MALEATE EQUIVALENT TO DOMPERIONE 10 IN Effective relief from fullness, bloating, queasiness, feeling sick and other stomach discomfort after eating

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W. A. Carlotti College College

Motilium 10. Gets stomachs back to work

Further information is available from Johnson Johnson MSD

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Marketwatch

Market analyst Information Resources reviews the top sales categories in pharmacies this year

review of performance within chemists over the last 12 months shows overall value sales of health and beauty aids have declined, but grown for OTC products.

It has been a difficult period for chemists, with grocers continuing to erode market share by exploiting their obvious scale advantages, longer trading hours and changes in consumer shopping patterns.

The impact of this share loss has been marginally offset by strong yearon-year growth within OTC categories. With resale price maintenance still active in this area, pricing in chemists remains competitive.

But with the RPM court case still pending, it remains to be seen whether sales growth will continue, or whether grocers will cut prices to increase their presence in this market.

Seven out of the eight highestselling categories within chemists are OTC medicine categories. Price rises, a move to premium packaged products and strong winter sales have resulted in an increase of 4.9 per cent in sales. OTC categories now account for 48 per cent of chemists' total health and beauty, and OTC sales.

Oral analgesics

Oral analgesics is the largest category for chemists, accounting for 16 per cent of total sales. Year-on-year growth is 4.8 per cent, with new formats, including liqui-gels, capsules and

Pharmacy sales winners 2000



caplets, driving growth and replacing traditional tablets.

The most successful launch was a brand extension rather than a new product. The release of Nurofen Meltlets helped the Nurofen brand win 20 per cent of the market. Supported by a strong advertising campaign, Meltlets helped Nurofen's sales grow faster than the category as a whole, replacing Solpadeine as the top-selling brand and reducing the market share of own-label products * Star performer: Nurofen Liquid Capsules

Cold & flu decongestants

Cold and flu remedies sold well this year as a result of the flu epidemics.

Sales in chemists rose by 9.2 per cent, perhaps anxious customers preferred to rely on the advice of local pharmacists.

The Lemsip Max Strength brand

replaced Sudafed as the best-selling product range, increasing sales by 37 per cent, a value of over £2m. Product development in this category was limited this year.

Two of the most successful launches were Happinose from Dendron and Medised from SSL. * Star performer: Lemsip Max Strength

Cough liquids

Sales of cough liquids in chemists have only increased by 2.3 per cent in the last 12 months.

Established brands have continued to perform well, although there has been no change within the top five.

Novartis continued to segment the market by introducing another variant to the Tixylix range, Tixylix Baby Syrup joins Tixylix Chesty Cough, Cough & Cold, Night-time and Daytime and is the most successful introduction in the category.

As with decongestants, demand is very seasonal, with 50 per cent of all sales realised between December and March. During the four weeks over Christmas, £12m was spent on cough liquids in chemists.

* Star performer: Benylin Non-drowsy

Vitamins and minerals

Because of the pull of supermarkets, especially their own-label products, chemists' share of this category is 17.3 per cent, down 1.5 per cent from

Seven Seas still holds the number one brand position in the market, with 23 per cent of sales. Seven Seas has recently launched an aggressive advertising campaign to increase brand loyalty and sales and reduce own-label penetration.

Many new products were introduced in this category, particularly own-label brands. The strongest growth came from St John's Wort, gingko, and other supplements including devil's claw and milk thistle.

* Star performer: Metatone

Indigestion remedies

Chemists' share of indigestion remedies has dropped slightly from 66.1 per cent to 65.3 per cent. Grocers have been growing at the expense of chemists, with ownlabel variants performing particularly well.

New product development in this category has been limited in the last 12 months. The only successful innovation has been Zantac Relief.

Launched in December 1999 as an extension to the popular Zantac 75 brand, its performance has substantially contributed to Zantac's growth.





Top pharmacy brands	52 w/e	52 w/e	%ch vs yr ag
ORAL ANALGESICS 1. Nurofen 2. Solpadeine 3. Calpol 4. Anadin 5. Panadol	Oct 10, 99 £32,199k £25,013k £23,339k £12,206k £7,489k	Oct 8, 00 £35,890k £25,087k £23,916k £12,863k £7,898k	11.5 0.3 2.5 5.4 5.5
COLD & FLU DECONGESTAN 1. Lemsip 2. Beechams 3. Vicks 4. Sudafed 5. Night Nurse	ITS £14,894k £10,928k £7,490k £6,928k £6,645k	£16,951k £12,241k £8,002k £7,900k 37,755k	13.8 12.0 6.8 14.0 16.7
COUGH LIQUIDS 1. Benylin 2. Covonia 3. Meltus 4. Tixylix 5. Sudafed	£21,898k £6,243k £4,736k £4,593k £3,639k	£22,808 £6,629k £4,988k £4,880k £3,516k	4.2 6.2 5.3 6.3 -3.4
VMS 1. Seven Seas 2. Sanatogen 3. Health Aid 4. Redoxon 5. Solgar	£15,556k £5,252k £3,829k £4,084k £2,349k	£14,234k £4,614k £3,525k £3,336k £2,039k	-8.5 -12.1 -7.9 -18.3 -13.2
INDIGESTION REMEDIES 1. Gaviscon 2. Rennie 3. Zantac 75 4. Bisodol 5. Milk of Magnesia	£19,653k £8,677k £4,003k £3,211k £1,906k	£21,509k £9,983k £5,189k £2,893k £2,104k	9.4 15.1 29.6 -9.9 10.4
SMOKING CESSATION AIDS 1. Nicorette 2. Nicotinell 3. Niquitin 4. Nicobrevin	£26,310k £13,829k £7,615k £186k	£27,997k £12,637k £8,295k £155k	6.4 -8.6 8.9 -16.7
HAYFEVER REMEDIES 1. Piriton 2. Clarityn 3. Beconase Allergy 4. Benadryl 5. Zirtek	£6,999k £6,311k £6,196k £5,650k £4,587k	£7,803k £7,329k £6,478k £6,103k £6,103k	11.5 16.1 4.6 8.0 29.2
MEDICATED CONFECTIONER 1. Strepsils 2. Halls 3. Dequacaine 4. Tyrozets 5. Potters Traditional	RY £12,369k £3,770k £1,915k £1,556k £1,526k	£12,672 £4,026k £2,048k £1,737k £1,667k	2.4 6.8 6.9 11.7 9.2

Source: Information Resources value sales in chemists, including Boots (except VMS data which is value sales in chemists excluding Boots)

Extensive advertising, new pack sizes and extra lines have driven brand growth in this market.



Gaviscon, Zantac, Rennie and Milk of Magnesium, have all grown by high single or double-digits.

* Star performer: Zantac 75 Relief

Smoking cessation

The value of this category for chemists has increased by 2.4 per cent. It is no surprise to see this category performing well, as it benefits from the growing body of regulations on smoking and increasing awareness of its health implications.

The so-called 'ash kickers' category is very lucrative, with annual sales of almost £58m. Despite a slight drop in sales from 1999, chemists currently enjoy an 85 per cent share of this market.

Category sales jumped 65 per cent to 5.3 million in the four weeks following Christmas, reflecting a



surge in the number of consumers who were determined to kick the habit in the New Year Innovation in this category is fairly healthy considering the number of brands on the market.

There have been two brand extensions in the last 12 months. Nicotinell has been extended to include lozenges and the Nicobrevin range now includes a gum variant.
* Star performer: Niquitin CQ

Hayfever remedies

Chemists have almost a 90 per cent share of the hayfever remedies category. Compared to 1999, category sales are up 9.2 per cent – undoubtedly influenced by the prescription-only status of many products in this category.

Piriton, Clarityn and Zirtek all benefited from healthy category growth, with sales up 12 per cent, 16 per cent and 29 per cent respectively. There is relatively little product development in this market.

The Care Hayfever remedy, distributed by Thornton and Ross, was the most successful introduction.

* Star performer: Zirtek

Medicated confectionery

Chemists have also lost some of their market share for medicated confectionery, but the problem is partly disguised by a sales growth of 5.4 per cent, again because of the good 1999/2000 season for winter remedies.

Innovation in this category was limited this year suggesting that this market has either already been segmented effectively or the



dominance of the top brands discourages new entrants.

It is astonishing that a category worth so much has seen little or no new product development. Crookes Healthcare dominates this market, with the number one brand, Strepsils, being stretched across a number of variants.

* Star performer: Lemsip antibacterial lozenges

'Star performers' are all established brands that bare displayed very strong growth compared with competing brands.





Complementing the conventional

Complementary and alternative medicine (CAM) is more popular than ever. A recent House of Lords Select Committee report has investigated CAM and made recommendations about the organisation and regulation of its therapies

cfore aspirin was synthesised 100 years ago, medical treatments were largely based on herbs, supplemented by minerals and, sometimes, animal products. Claims of efficacy were unsupported by evidence in virtually all systems of medicine. This was reinforced by the tendency, still found in Eastern systems of medicine today, to prescribe a mixture of many different herbs rather than a single remedy.

These treatments became marginalised with the progress of modern medicine, and are now seen as 'alternative' or 'complementary'. Complementary and Alternative Medicine (CAM) refers to a diverse group of health-related therapies and disciplines that are not considered to be part of mainstream medical care.

The Cochrane Collaboration defines CAM as "a broad domain of healing resources that encompasses all health systems, modalities, and practices and their accompanying theories and beliefs, other than those intrinsic to the politically dominant health systems of a particular society or culture in a given historical period".

The House of Lords Select Committee on Science and



Chiropractic theory posits impairment of the blood supply as the cause of musculo-skeletal disorders

Technology inquiry was set up because there is a widespread perception that uptake of CAM is increasing across the developed world. This raises significant issues of public health policy:

- Are there effective regulations to protect the public?
- Is an evidence base being accumulated and is research being carried out?
- Is there enough information on the subject available?
- Is the practitioner's training adequate?
- What are the prospects for NHS provision of these therapies?

Three groups of CAM

The Committee proposed that CAM therapies should be divided into three groups.

- Group One embraces what may be called the principle disciplines. Osteopathy and chiropractic are already regulated in their professional activity by Acts of Parliament. Each of the therapies in group one claims to have an individual diagnostic approach. They are seen as the 'Big Five' by most of the CAM world.
- Group Two contains therapies that are most often used to complement conventional medicine and do not claim to embrace diagnostic skills
- In the absence of a credible evidence base, the Select Committee believes that the therapies in **Group** Three cannot be supported unless their efficacy can be demonstrated.

This group is divided into two subgroups;

Group 3a includes long-established and traditional systems of healthcare, such as Ayurvedic medicine and traditional Chinese medicine

Group 3b covers alternative disciplines that lack any credible evidence base, such as crystal therapy, iridology and dowsing.

Who uses CAM?

Up to a fifth of the UK population uses CAM according to a survey last year by the BBC (see table 1). But this survey did not reveal whether the treatment was bought over the counter or obtained through a professional consultation. The survey



Western and Chinese systems of acupuncture offer different explanation for their effectiveness, but both use the same needling system to treat patients

also found that the average CAM user spent &I-4 per month on therapy, while almost two fifths spent less than &5 per month. Extrapolated to the whole of the UK, these figures indicate an annual expenditure of &1.6 billion.

Another survey asked respondents whether they had visited a practitioner of one of eight named therapies in the past 12 months. This revealed that 13.6 per cent of respondents had visited a CAM practitioner during the year. Over a quarter had either visited a therapist or bought an OTC remedy.

Therapists consulted the most often were osteopaths (4.3 per cent of respondents), chiropractors (3.6 per cent), aromatherapists (3.5 per cent), reflexologists (2.4 per cent) and acupuncturists (1.6 per cent). The NHS paid for an estimated 10 per cent of consultations, but the authors estimated that £450 million worth of out-of-pocket expenditure was used on six of the principal therapies (excluding aromatherapy and reflexology).

Another BBC survey looked at why people use CAM (see table 2). The General Medical Council has suggested that CAM's popularity may be due to society's current attitude towards science. Other suggestions include fashion trends, and a relationship to renewed interest in the paranormal or to the increased anxiety about health across society.

The Select Committee found satisfaction levels to be high among CAM users. Professor of CAM at Exeter University, Edzard Ernst, has done work suggesting that CAM

Group One: Professionally organised alternative theraples

Acupuncture: involves inserting small needles into various points in the body to stimulate nerve impulses. Traditional Chinese acupuncture is based on the idea of 'qi' (vital energy) which is said to travel around the body along 'meridians' that are affected by the acupuncture points. Western acupuncture uses the same needling technique, but is based on affecting nerve impulses and the central nervous system.

Chiropractic: used almost entirely to treat musculo-skeletal complaints through adjusting muscles, tendons and joints using manipulation and massage techniques. Diagnostic procedures include case histories, conventional clinical examination and x-rays. Herbal medicine: uses various remedies derived from plants and plant extracts to treat disorders and maintain good health. Also known as phytotherapy.

Homoeopathy: is a therapy based on the theory of treating like with like. Homoeopathic remedies use highly diluted substances that, if given to a healthy person in higher doses, would produce symptoms of the condition being treated.

Osteopathy: a system of diagnosis and treatment, usually by manipulation, mainly focusing on musculoskeletal problems. The discipline historically differs from chiropractic in its underlying theory that it is impairment of blood supply and not nerve supply that leads to problems. But in practice there is less difference than might be assumed.



Herbal medicine has grown in popularity in the UK

Group Two: Complementary theraples

Alexander technique: based on a theory that the way a person uses their body affects their general health. It encourages people to optimise their health by teaching them to stand, sit and move according to the body's 'natural design and function'. This is a taught technique rather than a therapy.

Aromatherapy: essential oils extracted from plants inhaled, used as massage oil or occasionally ingested. Common in France but practised there by physicians only.

Bach and other flower remedies: the theory behind flower remedies is that flowers contain the life force of the plant and this is imprinted into water through sun infusion, which is used to make the remedy.

Body work therapies, including massage: therapies that use rubbing, kneading and the application of pressure to address aches, pains and musculo-skeletal problems.

Counselling stress therapy: a series of physical therapies that attempt to help patients work through their thoughts and reflect on their lives so as to maximise wellbeing.

Hypnotherapy: the use of hypnosis in treating behavioural disease and dysfunction, principally mental disorders.

Meditation: a series of techniques used to relax a patient to facilitate deep reflection and a clearing of the mind.

Reflexology: a system of foot massage based on the idea that there are invisible zones running vertically through the body. Therefore each organ has a corresponding location in the foot.

Shiatsu: a type of massage originating from Japan that aims to stimulate the body's healing ability by applying light pressure to points across the body. It relies on the meridian system of 'qi' in a similar way to traditional Chinese medicine and acupuncture.

Healing: a system of spiritual healing, sometimes based on prayer and religious beliefs. It attempts to tackle illness through non-physical means, usually by directing thoughts towards an individual. Often involves 'the laying on of hands'. Maharishi ayurvedic medicine: a system derived from the Vedic tradition in India that promotes transcendental meditation. It recommends the use of herbal preparations similar to those used in Ayurvedic medicine (see Group Three) and traditional Chinese medicine (also in Group Three).

Nutritional medicine: a term used to cover the use of nutritional methods to address and prevent disease. The difference between nutritional medicine and dietetics is that nutritional therapists work independently in accordance with naturopathic principles and focus on disorders that they believe can be attributed to nutritional deficiency, food intolerance or toxic overload.

Yoga: a system of adopting postures with related exercises designed to promote spiritual and physical wellbeing.

Table 2: Reasons for using CAM

Table 2. Reasons for using CAM		
Reason	percentage of those	
	who use CAM	
Helps or relieves injury/condition	25	
Just like it	21	
Find it relaxing	19	
Good health/well-being generally	14	
Preventative measure	12	
Do not believe in conventional medicine	11	
Doctor's recommendation/referral	11	
To find out more about other ways of life/new thing	s 11	
Way of life/part of lifestyle	8	
Cannot get treatment on the NHS	7	
under conventional medicine		

therapists are friendlier, spend more time with patients and are more forthcoming with information on the treatment and disease.

The Consumers' Association has concluded that patients appreciate CAM's emphasis on a person's overall wellbeing. It suggested that the consultations are more satisfying because they are longer than those in conventional medicine. CAM therapists also have good communication skills that put patients at ease.

Regulation

CAM therapies vary widely in their regulatory aspects. The Select Committee recommended that "professions with more than one regulatory body make a concerted effort to bring their various bodies together and to develop a clear professional structure".

There are, for example, five associations representing non-statutory registered health professionals who practise acupuncture. By far the largest of these, representing 2,020 members, is the British Acupuncture Council.

There are a number of groups with an interest in herbal medicine. Many are constituent organisations of the new umbrella body - the European Herbal Practitioners' Association. This Association has declared that it is actively seeking statutory registration for its members.

Homocopathy is practised by two separate groups. Medical homocopaths are medically qualified practitioners regulated by the GMC. Non-medical homocopaths are represented by four main bodies, of which the largest is the Society of Homocopaths. This body has formally consulted its membership and is committed to pursuing a single register of homocopaths. It has begun to work with the second largest body, the UK Homocopathic Medical Association.

Recommendations

The Committee recommended that all NHS provision of CAM should continue to be through referral from doctors or other healthcare professionals working in primary, secondary or tertiary care. Only those therapies that are statutorily regulated, or have a strong method of voluntary self-regulation, should be available on the NHS.

Acupuncture and herbal medicine are thought to be at a stage where they should strive for regulation under the Health Act. Statutory regulation may eventually be appropriate for non-medical homoeopaths.

The Committee recommended that the Medicines Control Agency finds a mechanism that would allow the public to identify health products that meet licensing requirements.

The Government should maintain their effective advocacy of a new

Table 1: Use of CAM in the UK

HI UIC UN	
	Per cent
Use of any CAM	
in past 12 months	20
Of which:	
herbal medicine	34
aromatherapy	21
homoeopathy	17
acupuncture/acupressure	14
massage	6
reflexology	6
osteopathy	4
chiropractic	3

Group Three: Alternative disciplines 3a: Long established and traditional systems of healthcare

Anthroposophical medicine: aims to stimulate a person's natural healing forces through studying the influence of their soul and spirit on their body. Ayurvedic medicine: is based on the principle of spirit-body interaction and employing herbs, usually in mixtures, in treatment.

Chinese herbal medicine (see also traditional Chinese medicine below): a tradition of medicine that has been used for thousands of years in China and has its own system of diagnosis. Combinations of herbs are used to treat a wide range of health problems. Eastern medicine (tibb): a tradition that synthesises elements of health philosophy from Egypt, India, China and classical Greece. Tibb uses a range of treatments including massage, manipulation, dietary advice and herbal medicine.

Naturopathy: a treatment based on the principle that the natural laws of life apply inside the body as well as outside. It uses a range of natural approaches including diet and herbs, and encourages exposure to sun and fresh air to maximise the body's natural responses.

Traditional Chinese medicine: based on the theory that the body is a dynamic energy system. There are two types of energy – yin qi and yang qi – and it is thought that an imbalance of yin and yang qi causes symptoms. It uses treatments that aim to restore this balance. These include acupuncture, herbal medicine, massage and an exercise technique called qigong.

regulatory framework for herbal medicines in the European Union.Any new regulatory scheme should respect the diversity of products used by herbal practitioners.

• 'Complementary and Alternative Medicine' is the sixth report from the House of Lords Science and Technology Committee in the session 1999-2000. ISBN 0-10-483100-6, The Stationery Office, £15.50. The full text of the report is available online at www.parliament.thestationery-office.co.uk

Video surveillance exposed stock thefts

After stock started going missing at J R Butler Chemist in Reading, a video surveillance operation showed a locum pharmacist repeatedly taking items, the Royal Pharmaceutical Society's Statutory Committee heard on December 13.

At West Berkshire Magistrates Court, Rajiv Aggarwal, of Slough, admitted four theft offences and possession of a Class A controlled drug. He was later placed on probation for two years and ordered to pay compensation of £239.89.

Mr Martin Curley, for Mr Aggarwal, said he committed the offences due to a background of his family disapproving of his relationship with a woman.

Geoffrey Hudson for the Society said that in March this year a shortfall was found in stock at J R Butler Chemist. Video surveillance showed Mr Aggarwal, the pharmacist in charge, removing items, placing them in a plastic bag near his coat and taking them from the premises.

Missing stock included controlled drugs. On March 28 he was arrested and his home and car searched.

Lord Fraser of Carmyllie QC, chairman of the Statutory Committee, ordered Mr Aggarwal to be struck off, saying: "In many respects this is an unfortunate case but with some reluctance we have reached a conclusion, we have no other option."

Dispensing errors

Locum pharmacist Ronald Bergson was removed from the register at a Statutory Committee hearing on December 13.

While working at a pharmacy in Ham Green, Plymouth, Mr Bergson made two prescribing errors, giving one customer 13 weeks' medicine instead of 13 days, and a registered drug addict 500ml of an elixir that should have been 30ml.

The then superintendent pharmacist, Maurice Hickey, noticed the first error and intervened, and the second was prevented by the dispensing assistant

Geoffrey Hudson, for the Society, told the committee Mr Bergson had been taken on over the telephone. When he arrived for work, Mr Hickey was "struck by his unkempt and dishevelled appearance".

Mr Bergson, aged about 60, who now lives in a hostel for homeless people in West Brompton, asked to stay over night at the pharmacy.

Committee chairman, Lord Fraser of Carmyllie QC, ordered Mr Bergson's name be removed from the register because of the dispensing errors.

Committee adjourns its decision

A pharmacist involved in an inquiry over the death of a baby can carry on practising, the Statutory Committee of the Royal Pharmaceutical Society said on December 11.

Lisa Taylor-Lloyd had given the task of making up the prescription to a preregistration trainee. She had been fined £1,000 by Chester Crown Court on March 1 after admitting supplying a medicinal product not of the nature and quality specified in the prescription at a Boots pharmacy in Runcorn, Cheshire.

The court had found Ms Taylor-Lloyd, of Crewe, not guilty of manslaughter of the baby, who suffered cardio-respiratory arrest.

Geoffrey Hudson, solicitor to the Society, told the hearing that MsTaylor-Lloyd pleaded guilty to supplying 'Alder Hey' peppermint water with 20 times the required amount of concentrated chloroform water.

She and co-defendant Ziad Khattab, of Eccles, the pre-registration trainee, pleaded not guilty to a charge of manslaughter and no evidence was offered. Mr Khattab was fined £750 for supplying defective medicine.

Referring to the admitted offence

under the Medicines Act, Mr Hudson said: "It's a strict liability offence – diligence is required – and she was not able to establish that she showed due diligence.

"The error occurred in April 1998, when there were four members of staff on duty at Boots Pharmacy in the Hallwood Health Centre, Runcorn. She was a relief pharmacist, having been registered in July 1996."

On April 29 the baby appeared to be suffering from colicky wind and its mother took a prescription to the chemist and gave it to Ms Taylor-Lloyd, who asked how old the baby was. "She passed the prescription to Mr Khattab because it would have been good experience for him."

It took about 15 minutes to prepare and during that time an experienced dispenser intervened telling him what was required and wrote it down. However, Mr Khattab still made the error.

When the father gave the baby a dose of the peppermint water, the infant suffered a cardiac arrest and brain damage, dying on May 17, 1998. The cause of death was cardio-respiratory arrest as a result of chloroform.

Mr Justice Forbes, imposing sentence at the Crown Court, accepted Ms Taylor-Lloyd was "genuinely remorseful and affected by the tragedy" and felt it could be dealt with by a fine.

In answer to questions by the Committee, Ms Taylor-Lloyd, who has been working under supervision at Boots, said that if she was allowed to work again unsupervised she felt the public "would be safe in my hands". Her confidence would return by practising initially supervised. If she were supervising a trainee again she would check and "double check" the amounts given.

Giving the decision of the Committee, chairman Lord Fraser of Carmyllie QC said they were concerned that the proposed situation would leave Boots to decide when she could be unsupervised, although this was not a criticism of the company's approach. The Committee had therefore decided to adjourn for six months.

Lord Fraser said: "If there are no adverse comments in that time Ms Taylor-Lloyd can expect no more than a reprimand." Mr Khattab faces a disciplinary hearing at the RPSGB on a date to be fixed.

Fraud case leads to de-registration

A pharmacist said to have swindled £17,000 in a scam involving oxygen cylinders, for which he was jailed for 21 months, was ordered to be struck off on December 13.

Zia Ul Haq of Spennymoor, County Durham, who had also been involved in a prescription fraud with a local doctor, was sentenced at Teeside Crown Court on June 9 this year.

Finding him guilty of misconduct because of the convictions, the Statutory Committee ordered him to be struck off.

Chairman of the Committee, Lord Fraser of Carmyllie QC, said: "While we have listened carefully, the standards of the profession are such that there is no alternative but to make a direction that his name be removed."

Mr Ul Haq admitted conspiracy to defraud the Durham Health Authority

between January 1 and November 7, 1997, for which he received six months in prison, and admitted false accounting between January 1, 1993, and June 30, 1997, on which he was given 21 months concurrent.

Teeside Crown Court heard he had "expanded" into the oxygen cylinders fraud following the conspiracy carried out with a Dr Bhagat.

Geoffrey Hudson, for the Society, said Mr Ul Haq worked for a pharmacy in Shildon since 1987 and an investigation discovered "a system had been in place for some years, since 1989".

"Dr Bhagat ordered goods from the pharmacy, Mr Ul Haq would deliver them and make out an invoice. Payment would be made in the form of false prescriptions – made with a view to present them for payment."

Regarding the oxygen cylinders, Mr Hudson said the pharmacy had a contract with BOC and Mr Ul Haq received a fee for delivery of cylinders and later explained he had found patients did not need the full amount of the delivery or any at all. He believed it would be evened out.

However, Mr Ul Haq admitted there came a time when there was a "fairly significant overcharge", which the Crown said amounted to a minimum of £17,681,99.

Mr Harry Steinberg, for Mr Ul Haq, told the hearing his client accepted these were very serious offences "in a position of trust which he breached".

His client made no personal profit from the first offence. Mr Ul Haq had come under the influence of the doctor – "a charismatic, aggressive figure".

Surveillance operation caught pharmacist with stolen cash

A video surveillance operation was mounted when discrepancies were noticed in various south London branches of Boots the Chemists, the Statutory Committee heard.

Security officers also noted the numbers of bank notes in tills at the Brixton Road branch. As a result, pharmacist Chima Oko Ologhu was caught with £60 cash belonging to the firm. At Camberwell Green Magistrates Court, last August, Mr Ologhu admitted stealing £60 for which he was fined £500 and ordered to pay costs of £30.

At the Statutory Committee of the Royal Pharmaceutical Society on December 11, Mr Ologhu was ordered to be struck off the register after Committee chairman, Lord Fraser of Carmyllie QC, said: "This is a case involving a serious breach of trust." Emphasising that the Committee could not disregard the matter, he added:"We've no option but to remove his name from the register."

There was no pattern of deposits in his bank statement, nor any debt, he co-operated fully and other discrepancies were not part of this case, said Geoffrey Hudson for the Society.



Annual review

he year 2000 saw a bit of revolution for pharmacy: many long-awaited events finally took place. although not much was concluded, as pharmacy started off on a new road.

Besides setting out its NHS Plan, the Government presented pharmacists (in England at least) with their very first pharmacy programme. And while 'Pharmacy in the Future' may contain several threats to existing pharmacy contractors, the document also suggests many opportunities and heralds the growth of a new breed of pharmacist working in the community.

What has been reassuring is the government's acceptance that pharmacy has a significant role to play. Many of the services that community pharmacists have been piloting across the UK are now coming to fruition with the results showing that such schemes should be adopted. But does making pharmacy 'the Fourth Disposition' for NHS Direct suggest the profession is taking part in a Cold War thriller?

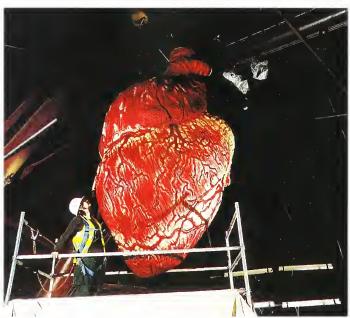
The Crown Review on prescribing has worked its way up past the civil servants in Whitehall, and the Queen's Speech of only a few week's ago offered the promise of pharmacist prescribing (if parliamentary time and a possible election allow). The prospect of electronic prescribing has also been given a firmer footing with the short list of tenders currently being decided.

September's historic British
Pharmaceutical Conference, which
saw health minister Lord Hunt
present the much-anticipated
pharmacy programme to an
expectant profession, was
unfortunately overshadowed by the
fuel protests. The day the profession
should rightly have had the media
attention it deserves, the fickle
public decided it wanted to do the
British thing and queue pointlessly
for a commodity that was overtaxed
and non-existent. Did I mention the
trains?



Clocks didn't stop, computers continued to work and planes didn't drop from the sky when Big Ben's chimes announced January 1, 2000. How was it for you?

So is this the Millennium?



Boots showed the world it had a lot of heart when it sponsored the Dome's Body Zone, alongside Roche and L'Oréal. It's a shame so few visitors went as they could have heard this heart beating in response to an accident, or could have seen monster pubic lice scuttling away from an outsize belly button



Booze, a cigar, and a beard it's Ernest Hemingway. Sorry. It's actually Dick Thomas, an independent community pharmacist from East Wales - so far east that he actually lives in Hampshire. He is seen here in a health promotion campaign celebrating the delights of a stogy and beer at the UniChem convention's Indiana Jones night held in the Puerto Rican rain forest. Don't worry, we saw through the disguise

Another long awaited event, the Resale Price Maintenance court case, finally started, four years after the Office of Fair Trading first said it wanted to challenge RPM. But with a slight mishap regarding the judge's panel, the case is now deferred until the spring. Don't ya just love the size of those lawyers' bills?

The year began with an interesting little story about the start of an emergency hormonal contraception service being operated by Manchester and Salford pharmacists. Despite its low-key launch on Christmas Eve 1999, this event grew in significance through 2000, as it was the key driver for community pharmacists supplying medicines under patient group directions.

Other areas around the country have followed suit, but a possible problem arose when it was announced levonorgestrel was to become a Pharmacy medicine.

Interestingly, another drug that had a bit of a controversial introduction, Relenza, is now the second prescription drug that can be supplied by community pharmacists under PGDs. Thumbs up, though, to that nice Mr Milburn for saying Zyban

Left: At the time of the shot, the situation in Florida had not been resolved, so Ulster Chemists' Association members had to put up with the incumbents Bill and Hilary at their Thanksgiving dinner. Thank goodness James McElnay was there to stop that other president dragging off Fiona Hart



Out in the Dubai desert, loyal Vantage customers awaited their turn while the inflatable magic carpets were refuelled



One idea for the caption under this cheery chappie was 'Who will rid me of this turbulent Council member?'. Here, however, showing a certain flair for wearing hats is Sid Dajani



Believe it or not, and you probably do, this is the Society's head of professional and scientific support, Roger Odd. This picture was smuggled out of the Dcccmber Council dinner and shows Mr Odd leading an interesting and exciting double life as a pantomimo dame for the village show. He's already signed up for the next show, rumoured to be South Pacific, 'There is nothing like a damc...

should be on the NHS before NICE had had a chance to review it

Talking of controversy was it really only in February that the president's flat purchase first surfaced? And only in August that the claims of 'financial disarray' echoed off the walls of the Society's Council chamber? Was mention of a NPA/PSNC merger idle gossip or simply a realistic appraisal of the need for the voices within pharmacy to unite?

There were a few goodbyes. The much-loved Ronnie McMullan MBE died suddenly and will be missed, not only in Northern Ireland, but throughout the UK. Ronnie regularly attended the BPC and always helped liven up proceedings.

Gary Flather QC stepped down as chairman of the Society's Statutory Committee. A passing comment he made about racial bias sparked an interesting debate within the profession.

Early reports of the death of the names Beecham and Wellcome. however, seemed a little exaggerated as the SmithKline-Glaxo merger continued to wade through treacle. Thank goodness for Pfizer and Warner Lambert's little love-in which is all done and dusted.

Gone, too, is the 'dreaded' Category D of the England and Wales Drug Tariff, But will its 'NCSO' endorsement replacement prompt comments of better the devil you know...? And anyway, are low, low prices really going to be guaranteed on generics? Perhaps Asda would like to comment.

So, what's in store next year for the friendly High Street chemist? Pharmacist prescribing, electronic links, revalidation, and abortion on demand, perhaps? It may also be prudent to start gearing up for an end to professional self-regulation. And perhaps you should say 'bye-bye' to bad habits such as avoiding continuing professional development and 'hello' to revalidation. Pharmacists: you do not want to be the weakest link.

All in all, the events of 2000 bode



Parliament Vicw deconstructed – an option on a flat was taken in this building, which was being constructed next to the Royal Pharmaccutical Society's headquarters, but members' hackles were raised when it was found that Council had not approved a £600,000 purchasc



Brad the Cure Bear is seen with the lord mayor of Belfast Cllr Sammy Wilson (right) and the president of the Pharmaceutical Society of Northern Ireland, Prof James McElnay, at the National Pharmaceutical Association's road show



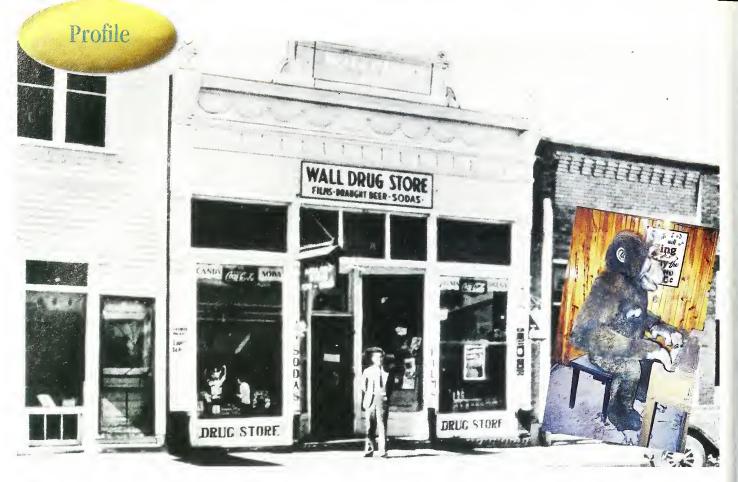
The All-Party Pharmacy Group has significantly raised the profile of pharmacy within parliament. Pictured at the Labour Party Conference are two of the MP members, chairman Dr Howard Stoate (standing) talking to Hemant Patel and PSNC's Mike King while the RPSGB's Beverley Parkin passes by, and Mark Todd scatcd between the NPA's Veronica Wray and the Society's Roger Odd

well for the future of pharmacy, but is that because we can't see what's around the corner. Let's hope the new direction the profession is taking, with the help of the government, will speed us on our way, but not just to the next crossroads (and I don't mean on the telly, although 'Corrie' may yet feature a pharmacist).

Take a few minutes, then, to reflect on what has been and what might be next year. Consider, too, just how ambitious, but wrong, Arthur C Clarke was when he wrote about 2001.



Following rumours of a possible merger between the NPA and PSNC, was it wisc for these two to be seen skulking away in the background on the award winning Pharmacy stand at the Labour Party Conference? Or do John D'Arcy and Wally Dove just sec a camera and smile?



A watery success

Travel writer
Godfrey Hall was
herding buffalo
in South Dakota
when he came
across an unusual
pharmacy,
thriving in the
middle of
nowhere

ife was not easy for pharmacist Ted Hustead.
Owning the only drugstore in Wall, a tiny town on the edge of the Badlands of South Dakota, was difficult.
Passing trade was almost non-existent and in the first five years he was there nothing really happened.

Then, one day in the hot summer of 1936, he and his wife had an idea that would eventually make their store famous throughout the States and around the world. They put up a sign

on Route 16A, which passed close by their pharmacy, and invited travellers to try their free iced water.

By the time they had finished erecting the sign, they already had several customers. As the afternoon wore on, more and more people arrived. Many bought ice creams and other goods. The idea caught on and by the next summer they were

employing eight extra staff Today, the store spans the whole street in Wall, has an annual income of over £5 million, and can attract up to 20,000 people a day.

It has a summer staff of 250, a pharmacy museum and a visitors' book for pharmacists. Attractions include a dining room and art gallery, together with a travellers' chapel and jewellery department. There is a large picnic area behind the store and a display showing some of the places around the world where Wall Drug Store signs have been seen. The restaurant seats over 400 people.

My two favourite attractions are the singing gorilla and the ferocious plastic T-Rex which appears suddenly from behind a fence!

Wall Drug Store proves that you can always succeed, because there is always something that the customer needs. With coffee still 5 cents a cup and unlimited free iced water available, you can't really go wrong.

To find out more about the store, go to its web site *www.walldrug.com* or send a fax: 001 605 279 2699.





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DotPharmacy celebrates its fifth birthday

Chemist & Druggist's web site dotPbarmacy is five years old. The site was launched just before Christmas 1995.

Since its early days, it has grown to more than 700 pages and records around 70,000 page views every month.

Recent new features on the site include Sharewatch, which provides the share prices of companies in the pharmaceutical sector.

Also new is the *C&D Directory*. This offers visitors the chance to search for information about products, services and companies or organisations.

In the news in that first issue was temazepam. Scherer, which claimed it would lose millions of pounds because of the Government's ban on NHS prescribing of temazepam capsules, had won the right to a full High Court review of its case. The ban was a reaction to abuse by intravenous drug users.

Scherer argued that then Health Secretary Stephen Dorrell failed to give "objective or verifiable" reasons for his decision, which the company described as "unfair" and made without adequate consultation.

The first news page carried five stories from *Chemist & Druggist*. Today's news pages regularly carry up to 16 news stories and the stop press section has updates throughout the week.

The site now carries Pharmacy Update modules in a format that pharmacists anywhere in the world can download for study in their own time, regardless of what type of computer they work on.

http://www.dotpharmacy.com/prices http://www.dotpharmacy.com/directory

IN BRIEF

Christmas closures

- Boehringer Ingelheim will close from 4pm on December 22 and will re-open at 8.45am on January 2. Its Medical Information Service will be available on 01344 424600 throughout the holiday period.
- William Ransom will close its office at 12.30pm on December 22 and re-open at 8.30am on January 2.

GSK merger takes final hurdle

The long-awaited £130bn merger between pharmaceutical giants Glaxo Wellcome and SmithKline Beecham has cleared the final hurdles. The two companies won approval for the merger from both the US Federal Trade Commission and the UK High Court, clearing the way for the formation of GlaxoSmithkline on December 27.

P2U concerned about impact of NHS prescription business

Pharmacy2U, the UK-based online pharmacy, has admitted it is concerned by the impact NHS scripts could have on its cashflow – though it is confident it will be able to cope with the situation.

Dr Julian Harrison, P2U's business development director, speaking last week at an e-pharmacy conference in London, said he was aware of the potential problems a large NHS business would bring.

When it was launched in 1999, the company only handled private prescriptions, but it now accepts NHS prescriptions, which it receives by post. These accounted for 9 per cent of its business-to-consumer turnover in October.

P2U wants to expand its NHS business significantly and said the introduction of electronic scripts would enable it to process them more efficiently. Its Pharmacy2U Consortium is one of seven parties shortlisted for the Department of Health's e-prescription pilots.

Jon Cohen, P2U's professional services development director, said: "If the cash flow [from NHS scripts] is a problem there are solutions in the pharmacy market (such as credit brokers), though there is obviously a cost to this service."

He added that P2U's team included pharmacists, such as managing director Daniel Green, who are used to coping with the cash flow delays of NHS scripts.

Dr Harrison said the company would introduce other sources of revenue, particularly in the business-tobusiness area, which would help to balance the cash flow equation. Its projects include:

- supplying dispensing services to hospital trusts
- supplying medication and dressings to multiple clinics over a wide area. Mr Cohen said companies operating these clinics would prefer to deal with one company only, which was an advantage to P2U
- supplying medication direct to PCGs/PCTs
- support services to pharmaceutical companies when they are tendering for contracts. P2U said it could give them a "pharmaceutical insight"
- clinical trials dispensing P2U would offer a central location to dispense to a number of clinical trial units, which it said would save pharmaceutical companies time and money.

P2U also wants to develop partnerships with clinical pharmacists to tailor supplies to secondary care units. It signed its first contract for erythropoietin with Leeds Hospital Trust in August, and believes there is scope for a national rollout for this type of service. P2U could also include other drugs in this service.

The company will also talk to PCGs to offer cost-effective services direct to their patients. It has had some preliminary discussions with the NHS Alliance.

B2B activities accounted for 59 per cent of P2U's revenue in September, while B2C made up the remainder.

It is also considering whether to have a presence in the digital TV forum because it believes this will be a potentially lucrative area in a few years.

Dr Harrison said P2U could draw comfort from the Government's plans to change the pharmacy reimbursement system. "Good pharmacists will be paid more – and our conversations with the Government suggest they mean this. We're confident this could be another way for us to make more money because we are offering professional pharmacy services," he said.

 P2U said it was disappointed that the Royal Pharmaceutical Society had not tried to ensure e-pharmacies met the guidelines it issued. Dr Harrison



Dr Julian Harrison, P2U's business development director

said: "They've chosen not to police these [pharmacies], which we find frustrating."

The RPSGB said it checked all pharmacies, including e-pharmacies, by visiting and inspecting their sites. UK online pharmacies, it added, are required to operate from premises that are registered with the Society and can be examined by its inspectors. "The public is entitled to expect the same high-quality pharmaceutical care irrespective of whether the service is provided on-line or face-to-face," it said.

Task force progress review on industry

The Government-Pharmaceutical Industry Competitiveness Task Force is said to have made 'substantial progress' while also identifying various areas where further work is needed.

The recommendations of one working group included expanding the 'Manufacturing for Biotechnology' programme and establishing regional centres of excellence in bio-manufacturing.

A review of schemes to promote training, technology transfer and research into specific areas was also suggested to make them more suited to industry and academia.

A different working group is looking at opportunities presented by the EU review of the current licensing system. At a meeting on December 13, the task force identified issues which could not be resolved without further discussion. The rules for prescribing medicines outside the NHS needed clarifying and the current regulations—should be

more clearly defined to provide patients with information. Moves were needed to secure effective industry involvement in developing and implementing the National Service Frameworks.

The task force meets again in March.

BASF sells off pharmaceuticals division

BASF AG is to sell off its pharmaceuticals business, known as Knoll, in order to focus on innovative chemistry and broaden the company's base for further profitable growth.

BASF has accepted a \$6.9 billion (£4.7 billion) offer for the business from Illinois based Abbott Laboratories. The deal is expected to

be completed during the first quarter of 2001, subject to regulatory and shareholder approval.

Abbott Laboratories' chairman and chief executive, Miles White, said that the acquisition of Knoll represented an excellent strategic fit and demonstrated the company's commitment to its global pharmaceuticals business.

AAH offers glimmer of Christmas Hope

AAH Pharmaceuticals has decided to reduce the number of Christmas cards it will send out this year and donate £2,500 to Good Hope Hospital, Sutton Coldfield (Birmingham) and Hope Hospital in Salford (Manchester) instead

The pharmaceutical wholesaler will split the money two ways in order to support specific initiatives at the two

At Good Hope Hospital, AAH will 'sponsor' a bed, which will have a plaque with AAH's name above it.

With the other half of the money AAH will sponsor one of the vans in a convoy embarking on a journey to Paris. The aim of the trip is to raise funds for Hope Hospital's MRI Scanner appeal, which is supported by the Mayor of Paris, through various events in the French capital.

AAH Pharmaceuticals' Home Health catalogue 2001 is now available. The catalogue, which provides information on everyday health issues under the topics Health Matters, Caring for the Body, Personal Medical Care, Mobility and About the House, will be available to the consumer through pharmacies.

Boots brings latest eye laser treatment to the High Street

Boots Opticians in London's Regent Street has brought the latest in laser eve surgery to the High Street. The purpose-built £1.7m eye clinic within the store opened on December 13 using the Boots Lasik laser.

The technique used by Boots, which was adapted from NASA radar space technology, combines the smallest eximer laser with a tracking system that compensates for involuntary eyemovements by reading the position of the eye 4,000 times per second.

The treatment, which costs £1,250 per eye, is suitable for patients with an optical prescription of minus 8 and plus 2 dioptres and whose eyesight has not changed in the past 12 months.

The first steps towards better evesight is a suitability questionnaire and a thorough 90-minute examination of the patient's eyes, with an optometrist and the surgeon assessing their suitability.

The procedure itself, which is carried out under local anaesthetic (eyedrops), only takes 20 minutes for both



David Cartwright, director of professional services, Boots Opticians, demonstrating the Boots Lasik equipment

eves and patients should be able to go about their normal business the next

'Laser eye surgery is an expanding market within eyecare, and this move is a fantastic opportunity for us," said Stephen Murray, managing director of **Boots Opticians**

The company says that there is certainly a potential to open up to a dozen such clinics in key locations around the country

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Out & About

he cruise ships and ferries are lined up around Bergen's picturesque harbour, while tourists mingle with locals at the fish and souvenir market on the quay. A stone's throw away, Hans Magne Solberg is hard at work serving customers and keeping his pharmacy running smoothly.

Situated in rented space in Kjottbasaren – a converted meat market now packed with specialist food shops and cafes that recalls London's Covent Garden – the pharmacy is just two years old.

The refurbished 19th century building retains the tiled floors, brick walls and iron pillars of its earlier days, but it has been tastefully modernised to provide a pleasant setting both for collecting medicines and ambling around the enticing food stalls selling everything from fresh salmon to reindeer steaks.

The Bryggen Pharmacy – named after the historic waterfront – was established as a branch of the nearby Elephant Pharmacy, which boasts a distinctive statue of an elephant outside to make its presence known. I ask Solberg why it is called the Elephant Pharmacy, and he laughs.

"Good question. It's just a tradition. There's a tradition of giving animals' names to pharmacies, such as swan or unicorn. It's one of the oldest pharmacies in Bergen."

New beginnings

Mr Solberg - who gained his three-year high school pharmacy qualification in Oslo - has been manager here since the new pharmacy was set up.

"As the newest pharmacy in Bergen, we have had to build up our customer base. It took time for people to know we were here." When the pharmacy was first opened, it advertised in the local papers to make its presence known. "The business is still growing. It is quite expensive to establish a pharmacy and build up regular customers, but people are gradually coming back. Good service to the customer is our strength.

"We have the whole range of medicines, both prescription and OTC," he explains as we sit in the storeroom behind the dispensary.

He adds that when Norwegians go to the doctor they must pay both the doctor (NKr180 or £13.25) and the pharmacist Although prescription medicines cost the same everywhere, there is no fixed price for them and they range from NKr60 to NKr300 (£4.50 to £22.50). There is no fixed price for OTC medicines. "You can

Hans Magne Solberg has built up a new pharmacy in a historic building in the bustling Norwegian port of Bergen, as Felix Corley discovered

The elephant's child...



"Good service to the customer is our strength," says Hans Magne Solberg

charge what you like," Mr Solberg declares bluntly. "We are in the upper middle price range – for Bergen.

"There are 40 chronic diseases or conditions - such as blood pressure, diabetes or cancer - where there is a ceiling on what patients must pay on medicines of NKr340 every three months. For other medicines, such as for pain relief, sleeping or nervous problems or antibiotics, there is no upper ceiling." Children under seven do not pay either for the doctor or for medicines on a central list.

For those who cannot afford a medicine, Mr Solberg is prepared to consider creative options, such as supplying fewer than the specified number of tablets. "We will always find a solution." But if the doctor has marked on the prescription that the medicines are urgent, "we will give them even if the patient cannot pay".

His pharmacy has three other fulltime staff. Of the four staff, two are pharmacists and two are technicians. "It is difficult to get staff, but we were lucky to get the number we wanted." The shortage of pharmacists is especially acute in remote areas where qualified staff do not want to go to live, although even in Norway's larger cities, such as Oslo and Bergen, there are unfilled vacancies. Pharmacists from other countries of the European Economic Area (Norway is not in the European Union) can come to work here. "Most foreign pharmacists are from Sweden and Denmark," he says, "though there are also some from the Netherlands and Britain. They must all learn Norwegian."

What language barrier?

Mr Solberg and his colleagues do get a chance to use their other languages, especially during the tourist season when cruise ships regularly stop off on their tours of the fjords. "I speak English and some German and a little French, another speaks Spanish and German while one of the technicians speaks some Hebrew and Arabic."

Occasionally there is a problem if a tourist needs a medicine that is not available in Norway."In June we had an Italian patient in need of a beta blocker which is not available here." Mr Solberg provided a list of similar medicines he had and the tourist was able to call his home doctor to check which one should be supplied.

The full blast of competition is about to hit the Norwegian pharmacy world next March, when a law already adopted by parliament comes into force. The law will allow the free establishment of pharmacies. He regards this as a "drastic" change. "I agree with a freer policy, but this is too much. I fear there will be too much competition. I am not sure if the public will be best served."

At the moment a pharmacy owner must have completed the five-year university pharmacy course, but this will not be required under the new law (although managers will still have to be pharmacists themselves). Chains of pharmacies will also be allowed for the first time. "One of the wholesalers is already planning on buying up pharmacies or entering into contracts to establish a chain. Some pharmacy owners are already forming a chain."

Mr Solberg has his say as an elected representative on the Norwegian Association of Pharmacists. Although he is on the central board, he rejects any ambition to become president of it. "It's not my thing," he admits. "Anyway, the office is in Oslo and I prefer living in Bergen."

A kind of friendly rivalry exists between Mr Solberg and his colleagues at the Elephant Pharmacy. "We have a few more customers than they do, but they actually produce medicines, which we don't." He admits ruefully that his Bryggen Pharmacy is yet to turn a profit, but is convinced it will soon.

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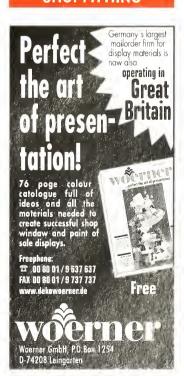
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CHEMIST& DRUGGIST PRICE SERVICE



This Supplement updates the latest Chemist & Druggist monthly Price List. It provides a cumulative list of amendments and previous Supplements should therefore be discarded.

Trade prices are per unit unless otherwise stated. Bold upright figures (0.14) in the retail column indicate price is subject to retail price maintenance. Italic figure (0.14) is the manufacturers recommended price. Light upright (0.14) is a suggested guide. $\mathbf{a} = \text{price}$ advanced. $\mathbf{r} = \text{price}$ reduced. $\bullet = \text{new}$ entry. $\mathbf{d} = \text{deleted}$. $\mathbf{c} = \text{change}$ or correction. $\mathbf{i} = \text{insert}$. Three simple rules for price checking. 1. Look under 'This Week's changes'. If price is not listed. 2. Check cumulative section. If price is not listed. 3. Refer to the last main price list. Price is latest notified.

This week's changes to the January Price List.

		PIP code	Trade V	'AT	Retail				PIP code	Trade	VAT	Retail
LENDRONATE SODIUM (see	Fosamax O	nce Weekly)					BIOPATHY (Broceuticals)					
LUPENT (Boehringer Ingelheir		nee meenig,					organic massage oil					
metered aerosol complete		000-9076	2.90	S	POM	d	anti-cellulite	125m1	048-9930	9.71	S	17.56
refill		()(0)-9()92	2.66	S	4.69 POM	d	basic	125ml	048-9831	5.71	S	10.25
NADIN IBUPROFEN (Whiteh		_					facial	125m1	048-9948	971	S	17.56
tablets							relaxing after sport	125ml	048-9856	971		17.56
200mg	24	243-4686	7.84(6)	S	2.19 P/SL	d	revitalising	125ml	048-9880	9.71		17.56
RMAND BASI (Aspects Beauty							royal luxury	125ml	048-9849	9.71		17 56
femme	,, ,						relaxing bath oil	125ml	049-0102	9.71		17.56
eau de toilette							tonic hath oil	125ml	048-9963	9.71	S	17.56
spray	50ml	268-9545	13.23	S	25 00	Г	BIOPSYLLIUM (Bioceuticals)	1.000	422 2025	2.02		4.07
SSURA (Coloplast)			10120				husk	100g	032-2925	2 72	S	4 97
one piece closed bags							DIONIE D	350g	()4()-()184	8.46	S	15.00
maxi	clear	211-8735	68.34(30)	S		c	BIOVIT (Bioceuticals)					
	opaque	213-5010	68.34(30)			c	B12 tahlets 500meg	100	009-6230	4.01	S	7.30
midi		024-5621	68.34(30)			Ċ		30	040-0192	3 29		5.79
***************************************		024-7080	68.34(30)			C	Mega B complex capsules	60		5.59	S	
two piece urostomy bags	opaque	024 //////		.,			BIOVIT-A (Bioceuticals)	DO	011-8539	3.,39	.5	10.15
maxi	clear	211-9097	75.30(30)	9		c		90	040-0051	e ne	0	0.710
HIGAI	opaque	211-9121	75.30(30)			C	tablets BIOVIT-B5 (Bioceuticals)	90	040-0051	5.05	S	8,99
midi	clear	211-9071	75.30(30)			c						
paediatric	opaque	211-9071	75.30(30)			C	pentothenic acid tablets 500mg	60	036-0735	4 43	S	7.88
SURA SOFT COVER (Colop	opaque doct)	21119102	1.1.30(30)	J		C	BIOVIT-C (Bioceuticals)	DO	0.50-0/33	443	3	7,00
one piece closed bags	nastj							60g	036-0529	1.52	S	2.94
maxi							powder	100g	030-0529	2.56	S	4.68
starter hole		248-1885	68.34(30)	0			tablets	rong	002-2000	210	3	4 (10)
	opaque					C	1000mg	32	036-0495	1.83	S	3.37
midi	opaque	248-1810	68.34(30)	2		C	tablets chewable	34	(13(1-1947))	1.00	3	21.77
VENT (Cannon Ruhber)							500mg	100	025-3179	3.53	S	6.41
Effective January 01							BIOVIT-E (Bioceuticals)	100	023-3179	2 22	3	0.47
Magic cup plus soft spout							oil	50g	040-0143	3.77	S	6 99
twin	70z/200m]	275-8878	3,99	S	6.25	•	tahlets	Jug	040-0143	3.11	.5	0.49
Magic cup plus toddler spout							chewable					
twin	9oz/260ml	275-8886	4 15	S	6.50	•	1000μ	90	040-0119	9.78	S	17.02
OCA (Bray Health & Leisure)							vitamin E powder	50g	011-8851	3 23	S	6.25
wart & verruca set		245-5095	1.74	S	P	a	vitalilli L powdei	75g	095-7225	5 11	S	9.30
ROTEC 100 (Boehringer Inge	elheim)						BODYFORM (SCA Hygiene Product	1.1g	177.7-7223	211	3	9 11/1
fenoterol hydrobromide 100 m.	icrog/puff)					d	Effective January 01	(5)				
nbaler 200 dose 10ml	vial	014-8668	2.36	S	4.16 POM	d	25 case rate					
ROTEC 200 (Boehringer Inge	elheim)						panty liners	24	099-8088	8.70(12)		0.89
fenoterol hydrobromide 200 m.	icrog/puff)					d	painy inters	50	244-2325	18.94(12)		1.78
nhaler 200 dose 10ml	vial	021-9642	2.78	S	4.90 POM	d	active large multi	30	263-2867	10.74(12)	Ī.	1.96
O. (Bioceuticals)							active normal multi	20	263-2800		Ĺ	1.30
cedophilus							active normal mate	34	263-2842		Ī.	1.96
tablets	90	032-3089	3.71	S	6.62	a	air normal multi	34	263-2784		Ĺ	1.96
arotene tablets	30	046-3166	4.43	S	7.89	1	air normal single wrap	18	263-2776		Ĺ	1.34
lophilus						•	string	3()	263-2891		L	2.11
powder	50g	036-0818	18.47	S	32,56	a	sanitary towels	.)()	200-2071		L	ii.11
odine	24.6	0.00	10.47		. 14-4-11	u	normal	24	244-6722	18 95 (12)	1	1.78
tablets	50	036-0834	4 14	S	7.30	а	towels	24	244-0722	10 75 (12)	L	1.70
inseed oil	125ml	095-7209	3.43	S	6.05	a	string	1.2	275-3978		·L	1.96
inseed on	500m1	005-9337	6.00	S	10.54		BODYFORM GOODNIGHT (SCA				L	1.70
DBEES (Bioceuticals)	JOOHII	MI 9331	(3,(8)	3	117 279	a	25 case rate	. ryElette	r roducty)			
resh royal jelly	25g	049-0128	32.45	S	56.36	a	sanitary towels	10	075-2790	17.67(12)	1	1.78
rean royal jelly	100g	049-0128	118.04		213.41		BODYFORM INVISIBLE (SCA Hy,			17307 (12)	_	/11
oual face gream		036-0669				a	25 case rate	Figure 1.1	Court 1			
oyal face cream	30g	1750-UND9	6,68	S	11.88	а	towels					
OBION (Bioceuticals)	144	042.24.00	11.30	0	20.07		normal	16	216-8078	23.53(16)	1	1.78
vum vaginal tablets		042-3640	11 29	S	20.01	a	super	14	208-6833	23.53(16)		1 78
ahlets	100	042-3624	8.10	S	14.34	a	towels with wings	14	www.coopy	as 25(10)	L	7.70
OCEUTICALS (Bioceuticals)		022 2112	1.1.07	0	3 (70		normal	14	023-0508	23.53(16)	I.	1.78
doe vera juice		032-3113	14.06	S	24.79	а	super	12	023-0995	23 53(16)		1.78
	250ml	048-9765	4.10	S	7.31	a	BODYFORM PLUS (SCA Hygiene F				-	
	500ml	048-9740	8 02	S	14 27	а	25 case rate	- conets				
iscorbyl palmitate							sanitary towels					
powder	10g	009-5968	3.08	S	5.41	a	normal	16	011-0585	29.44(20)	L	1.78
calcium ascorbate							super	14	011-1336	23.54(16)		1.78
powder	250g	009-5893	9.13	S	16.23	a	BODYFORM SUPER (SCA Hygiene			a.cc+(10)		
tolic acid							25 case rate	. i roudt	***/			
tahlet	60	009-6123	3.59	S	6.41	a	sanitary towels	20	028-7268	18 95(12)	1	1.78
inseng extract	30g	011-8695	16.04	S	28.33	a	BODYFORM ULTRA (SCA Hygien			10 72(12)	_	1.70
paba tahlets	90	036-0545	4.43	S	7.88	3	24 case rate	e i reduc	,			
wheat germ oil	125cc	005-1375	1.90	S	3.50	a	panty liners					
OMAGNUM (Bioceuticals)			*****				large flat	3.7	249-0191	18 29(12)	1	1.74
tablets	50	032-2750	4.50	S	8.14	a	normal flat	20	249-0191	18.29(12)		1.74
	-17				1011		IIOTHIAI TIAI	20	-T-1/11/1/	11.02(14)	L	1.10

		PIP code	2 Trade - V/	VI R	etail			PIP code	Trade '	VAT	Retail	
	38	249-0175	18 29(12) 1		7-4	d	insert extra pads 28		14.18(8)	S	,	C
normal singe wrap BODYVITAI (Dove Marketing)	18	249-0183	23 71 (24) 1		18	d	maxi plus ultra 28 midi 28		13,20(4) 17 00(8)	S		C C
77 plant minerals BUTLER (Dent O Care)		231-8079	11.89 .5	5 19	9,5	d	midi plus 28 mini 28		21.59(8) 17.94(12)	S		c c
accessories flossmate bandle	845RQ	014-2026	18.00(12) 5				pants					
dental floss	,					a	pouch 30-35in 36-41in	079-7522	3.79 3.93	S		C
Butlerweave Eez-Thru	50 yds	057-9318	13 40(12) S	5		a	42-47in 48in		4 00 4 13	S S		c
floss threaders (20) postcare implant floss	840RQ	014-1853 208-4671	18.00(12) S 24.65(25) S			a a	stretch pants 100's small 100's medium		30.69 28.27	S		c
dental tape 20 yds	12000	202-8215	13.40(12) 5				100's large f00's ex large	225-6741	28.96 30.69	S		C
gum angle	420KQ	202-0210	13.400(12)	1		u	CONVEEN (Coloplast)	223-07.78	.10.09	3		C
toothbrush compact head medium	433R	231-3013	14.47(12) 8	5		d	Urisheath self sealing short		45.03 (30)	S		С
gum straight toothbrush compact head							self-sealing CULMAK (Cufmak)	008-2933	45 (03 (30)	S		C
medium interdental products	453R	236-2333	14 47(12)	Ś		d	razor/5 blades shaving brushes	258-0082	7.45(5)	5	2.35	Γ
Proxabrush	610DNO	057-9250	26 00(12) - 8				Concord 35130		12 06 (6)		3.15 3.45	a
metal + 614 metal bandle	610PQ	014-3248	24 65(12) 8	Š		a a	Vega 35120		6.60(3) 11.82(6)	S S	3.43	a
plastic + 612/614 plastic handle	605PA	014-3024 014-2745	22.40(12) S 14.50(12) S	Š		a a	shaving soap Caber					
refill brushes Trav-Ler	10	057-9284 236-2358	26.80(12) S 23.50(12) S			d a	refill 85g CULMAK AUTOFOAM C (Culmak)	246-5011	12.84(6)	S	3.35	а
extra fine head ultra fine head	3	239-5465 212-3347	23.50(12) S 23.50(12) S			a a	Toam & gel brush CUMFIES (Tyco Healthcare)	260-5012	10.52(3)	S	5.49	r
mouth mirrors		014-4568					celanorm shaped pads	011 5020	10.19	c	15.99	
plastic stimulator			12.30(12) 8			a	3 bags of 25 night extra	014-5847	10.18 12.32	S	19.29	c
handle & tip refills (3)	600RQ 601R	202-8207 204-5631	14 90 (12) S 10 33 (12) S			a d	5 bags of 25 day day extra	014-5706	5 93 6.27	S S	9.29 9.89	c
toothbrushes standard bristle							6 hags of 28 midi 6 hags of 34 mini extra		5.26 5.12	S	8.19 7.99	c c
Orthodontic standard nylon bristle		. 013-8172	15.20(12) S	8		а	6 bags of 40 mini celastic all-in-one pads		5.28	S	8.29	С
denture brush		013-8164	16.60(12) 5	S		a	3 bags of 20 night ex large		16.33	S	25.69	C
CALIFORNIA LEGS (Keyline B alpha hydroxy renewal lotion	170ml	238-3073	9		99	d	3 bags of 24 night large night medium	213-3767	19 69 16.94	S	29,99 26.69	C
leg & body scrub peppermint foot lotion	170ml 120ml	238-3065 238-3032			99	d d	day medium day large		17.09 20.02	S	26.79 30.99	c
shave gel sensitive skin 238-3016	200ml			3.	99	J	4 bags of 20 night small day small	213-3775 014-5607	11.25	S	17.66 16.29	c c
CANESTEN (Bayer Consumer) (distributors Laser Healthcare)							incontinence pads					
tbrush cream 2%	20g	263-5209	27.30(10) S	5 4.	79 P	a	12 bags of 20 small 29g		2.00	S	3.16	c
CARDURA (Pfizer) tablets							6 bags of 20 large 77g 8 bags of 20 medium 50g		4.31 2.93	S	6.78 4.61	c
1mg 2mg	28 28	047-9113 047-9121	10.56 S 14.08 S		POM POM	C	standard 10 bags of 25 regular 35g	077-8845	2.10	S	3.30	С
4mg CHEMICO (County Chemicals)	28	047-9139	17.60 S	5	POM	L	12 bags of 25 mini 20g 6 bags of 25 large 60g		1.91 4.18	S S	3.00 6.58	c c
bathroom cleaner anti-bacterial	500ml	276-4736	12.07(12) 8				8 bags of 25 medium 45g smoothline briefs		3.12	S	491	c
cream cleaner	280mI	045-0726 037-8794	11.57(24) \$	S		Γ	carton of 25 extra large		4.53 4.39	S	7.15 6.94	c
	500ml 540ml	045-0742	8.30(12) S 8.10(12) S	8 1.	18	η 1	small medium	014-5524	4 39	S	6.94	c
anti-bacterial lemon	500ml 500ml	276-4702 276-4710	8.56(12) S 8.30(12) S	S			DANSAC (Dansac)	014-5540	4.39	S	6.94	С
disinfectant dry foam carpet cleaner	5ltr 5ltr	004-9130 025-1256	6 16(2) S 15 38(2) S		42 55	d d	InVent Convex dramable					
general purpose cream cleaner	Sltr	011-4009	9.86(2) S		68	d	pre-cut 10 InVent Symmetrical Convex	262-7065	23,40	S		a
household cleaner	1.81kg	006-0178 004-9189	9 60(4) S	5		ľ	dramable	262-7180	23 40	S		a
	12 7kg 400g	004-9155	9.92(12) \$	S		r	10		23,40	S		a
household cleanser kitchen cleaner	3 62kg	004-0899	16 44(4) - 8		09	a	Light Convex closed					
anti-bacterial stainless steel cleaner	500m1	276-4744	11.81(12) 5	8		•	pre-cut 10		21.77 21.77	S S		a
anti-bacterial window & glass cleaner	500ml 500ml	276-4751 276-4769	14.41(12) S 11.68(12) S			:	Unique 2 S flange 36mm	229-0211	13 67 (5)	S		a
CHRISTY (Network Health & Be Lifective January 01							43mm 55mm	229-0245	13.67(5) 13.67(5)	S		a a
Keromask		004-5807	5 68 5	2 (1)	95 BS		Unique Light closed	227 (72/11)	13.07(.7)	,		и
finishing powder premix		018-8995	5.68 \$	5 9	95	a a	pre-cut 30		63.49	S		С
skin masking cream COLLINS ELIXIR (Collins Elixi	tube 15ml r Co.)	032-7882	5 68 S	8 9.	95 BS	a	with starter hole 30 DENES (Denes Natural Pet Care)	225-0280	63.49	S		a
Effective January 01 decongestant pastilles							veterinary herbal products cat food 185g			S	0.46	J
menthol & eucalyptus COLOPLAST (Coloplast)	45g	273-8722	8.28(12) S	3 L	15 GSL	•	beef & liver with herbs 075-0695, chicken & turkey with herbs 075-0703,					d d
irrigation products	1014	049-2900	118 60 (100)				salmon & tuna with herbs 075-0711 400g	028-6575		S	0.50	l I
Colocap	1014	1947-29UU	[18 60(100)	8		С	gourmet 185g			S	0.55	i
K-Flex range Extra	No 2	036-6609	118 60(100)				rabbit & turkey 276-4934, salmon & tro tuna & sardine 276-4918, duck & rabbi	276-4900		6		i
	No 3	036-6617	142.50(100)	5		С	dog tood 400g etneken, beet & liver with herbs 075-060	i/		S	0.87	a d
rleo-B		036-6690	176 60 (100)	S		C	liquid garlic S00g	007-9160 031-6281		S S	1.48 2.90	a
	white 0404	036-6708	175.50(100)	S		C	puppy food 400g skin balm 50g			S S	0.85 2.90	a
MC2000 range		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		S		C	tablets all-in-one 100			S	4.40	a
closed end	opaque	028-4216	73.50(30) 5			C	for cats 220-7009, for dogs 025-9234			S	13.99	d
	clear ini opaque	028-7672 030-8908	73.50(30) S 73.50(30) S			C	for dogs 400 denex 50	007-7578		S	4.25 GSL	a
MC2002 range appliance	closed end		41.52(30) S			C	elderberry 100 200	024-3279		S S	4.70 GSL 8 50 GSL	d d
PC3000 range	closed end	055-4253	41.52(30) S	S		C	garlic 50	019-4886		S S	2.90 GSL 5.10 GSL	a
closed end	clear opaque	018-8169 018-8789	69.42(30) 5 69.42(30) 5			C C	200 400			S S	8.50 GSL 14.50 GSL	d 1
open end 8660 60mm 074-8863	opaque		71.13(30)			c	gastric 50	(107-4641			26.40 GSL 3.00 GSL	d a
COMFEEL (Coloplast)						J	greenleat 50	007-4971		S	3.00 GSL 5.35 GSL	a
protective film sachets	4735	007-2421	9.66(30) 8	S		Ĺ	200	021-0591		S	8.50 GSL	d
COMFORTA (Tyco Healthcare) incontinence range							400 800	007-4666		S	14.70 GSL 26.40 GSL	i d
bed pads 60 x 60cm	3.5	209-4084	25.40(4) 5	S		C	kidney 50 nerve 100	022-5649		S	4.25 GSL 5.30 GSL	a
dry-form extra	14	209-3623	21.74(8) 5	8		C	200 400	276-4892			8.50 GSL 17.40 GSL	d i
normal super	14 14	209-3615 209-3771	18.17(8) S 21.74(6) S	8		C	raspberry 100			S S	26.40 GSL 5.25 GSL	d a
dry-line							rhuharh 50			S	2.60 GSL	d

		PIP code	Trade	AT	Retail				PIP code	Trade	VAT	Retail	
seaweed	100	022-1606		S	4.70 GSL	d	lightweight		208-8672	1.83	S	2.80	C
wholegram biscuits	200	022-5623		S	8 50 GSL	d	net pants extra large	518	208-8409	2.34	S	3 57	C
bite nature biscuits	10kg 25k	207-6727 025-9531		S	18 25 3.20	d d	large medium	5's 5's	208-8391 208-8383	2.31 2.26	S S	3,53 3.45	C
nature log treat	800g 85g	025-9580 207-6719		S S	1 69 0 62	d d	small pillow protector	5's	208-8375 268-6863	2 23 0 85	S	3.41 1.28	C
DENTANURSE (Dentanurse) first aid kit for teeth							rectangular pads maxi + ultra	30°s	208-8466	4.35	S	6.65	c
check-up mirror standard flat pack		029-3449 046-3141	34.00(50) 32.10(6)		0.99 10.95	a u	micro ultra mrdi + ultra	30°s 30°s	208-8441 208-8458	1.77 3.46	S	2.70 5.29	C C
standard tube pack travellers		220-1622		S	10.95	J	seat pad washable		208-8748	11.25	S	17.25	c
flat/disposable needle		220-1630	32 40(6)		10.00	a	shaped pads	102		2.42	S	3 69	
tube/disposable needle DORMEL (Bray Health & Leisure)		220-1648	32.40(6)	S	10.99	u	extra normal	10's 10's	208-8417	2.07	S	3.17	Ü
infant mini feeder DYLON (Dylon)		007-7271	0.89	S		a	super wipes	100	208-8433 208-8615	3,29 1.58	S S	5.02 2.45	C
Acrobatik EASI-DROP (Vidcom Marketing)	40ml	276-4942	7.12(6)	S	2.09	•	orthopaedic range home health pillow		268-6814	2 99	S	4.48	C
eye-drop guide pharmacy pack	1	201-4769	5 00(5)	S	1.99	c	neck pillow orthopaedic case		268-6806 268-6780	6.50 2.09	S	9.75 3.13	C C
EASIFIX (Bray Health & Leisure)	2	201-4785	10.00(10)	S	1.99	C	orthopaedic pillow pyramid pillow		268-6772 268-6798	3 15 4 50	S	4 72 6 75	C C
finger stalls NHS	206	018-6528	4.32(12)	S		il	HYPOVASE (Pfizer) B D starter pack		006-8882	2.52	S	. POM	Ĺ
EFAMOL PMP (Efamol) (distributors Nutricia Dietary Care		17111112217	(1=)				tablets Img	56	017-3385	2.69	S	. POM	Ü
(evening primrose oil, vitamins &	mmerals)		20.52763	L.	5 99 GSL	d	2mg	56 56	017-3500 017-2882	3.66 2.09	S	. POM POM	L
capsules EFAMOL SKINCARE (Etamol)		245-4569	20.52(6)	3	1 44 O2F	d	500mcg IMEDEEN TIME PERFECTION	N (Ferrosan)				Ĺ
(distributors Nutricia Dietary Care body lotion	250ml	251-8249	10 17(3)	\$	5.95 GSL	d	tablets	60 120	276-4330 276-4348	31 91(6) 59 15(4)		37.50 69,50	
dry skin cream band & nail cream	100ml 75ml	251-8215 251-8223	11 13(3) 6.00(6)	S	6.50 GSL 3.50 GSL	d d	INECTO (Keyline Brands) rapid	small		4 65 (3)	S		d
EFANATAL (Efamol) (distributors Nutricia Dietary Care	2)						black 097-7587, deep black 0 super black)47-7 <u>5</u> 79					d
(evening primitose oil, rich fish oil capsules	l, sitamin i	E) 237-7091	18 78(6)	S	5.49 GSL	d d	hair colour creme JUVELA (SHS)		005-6424	4.80(3)	S		d
ENDEKAY (Manx Pharma) fluotabs	200		21.96(12)		3.07 P		gluten free sweet hiscurts	150g	276-4959	12.60(6)	7.	BS	
3-6 years 074-3872 EVOPRIM (Biocenticals)	_(///		_1 /0(1_)	.,	5.07	C	KEMPINE (County Chemicals) disinfectant		042-3665	8 20(2)		7 22	d
evening primrose oil							KOGENATE (Bayer Pharma)	.211)	042-3000	0.20(2)	3	/ ==	d
capsules 500mg	30	095-7555	2.58	S	4.51 SL	d	vial 250iu		209-6782	124-15	S	POMHP) [
1000mg	90 30	005-9030 025-4631	6.39 4.57	S	77 26 SL 8 75 SL	d d	KYTRIL (Roche) ampoules						
FAMVIR (Novartis Pharms) (ablets							1mg 3mg	5	227-6855 008-0028	60 00 180 00	S	POM . POM	C C
125mg 250mg	10	217-4746 217-4738	28 12 84 35	S	POM POM	(paediatric liquid	10 30ml	007-9913 231-2825	360 00 54.86	S	POM POM	C C
	21 56	223-8582 240-7997	118 08 314 90	S	POM POM	C C	tablets fmg	10	203-7844	91.43	S	POM	C
500mg	14 30	250-5782 250-5816	157 47 337 34	S	. POM . POM	C C	2mg L'OREAL (L Oreal)	5	231-2817	91.43	S	. POM	Ĺ
one-a-day	56	250-5790	629,89	S	POM	C	Casting Tone on Tone colourant		006-2489	13.50(3)	S		а
750mg FILTRODOR (Coloplast)	7	233-8150	112.72	S	. POM	c	Colour Fitness hair colourant for men		273-0117	18 00(3)			
activated carbon filters	0509	028-4133	20,10(50)	8		C	Excellence						a
FOCUS CLERZ (CIBA Vision) comforting eye drops	10ml	241-5651	2.47	5	3 99	c	permanent hair colour Kids		214-3295	15 75 (3)			а
FOLTENE (Keyline Brands)	20×0 4m1	276-4694	2.26	S	₹ 79	I	sbampoo Recital	250m1	260-1532	11.22(6)	S		a
Research bair loss prevention							bighlight kit Les Blondissimes		024-9334	16 48(3) 16 48(3)			d d
treatment phials FOSAMAX ONCE WEEKLY (Mc		209-5255 & Dohme)	42.81(3)	8	23.95	d	light natural blonde 051-044/ lightest golden blonde 051-0-		h blonde 051	-0453,			d d
(alendronate sodium) tablets						ı	Les Norrs Richesse super blonde		253-6605 015-2363	17.22(3) 16.48(3)			a d
70mg FSC (Food Supplement)	4	274-9141	23 12	S	POM	•	Recital Preference cream bair colourant		035-3789	17.22(3)			a
(distributors Health & Diet Food) antioxidant livercare							Studio Line crystal wax	50ml	265-9381	17,98(6)			a
formula	30 90	276-4082 276-4090	17.10(6) 44.22(6)	S	4.99 12 99		design gel	150ml	017-1918	14.83(6)	5		ü
head high pro-amino				S		•	fixing gel fixing spritz	150ml 150ml	044-9447	14.83(6) 14.83(6)	S		a
capsules HAEMACCEL (Beacon Pharms)	60	040-8377	17 10(6)	.>	4 99	C.	bigh gloss wax invisi gel	75ml 150ml	257-7104 240-3640	17.98(6) 14.83(6)	S		a a
Effective January 01 infusion		001-3292	3.71	S	6.54 POM	c	invisi hairspray invisi liquid gel	250ml 150ml	268-8018 240-3657	17 98(6) 14 83(6)	S		a
HAWAHAN TROPIC (Hawanan 1 Effective January 01	Fropic Eur	upe)					invisi mousse moussing curls	200ml 200ml	240-3665 203-7331	14.83(6) 14.83(6)			a a
aftersun glitter aftersun gel	400ml 200ml	275-7862 275-7839	35 40(6) 25.79(6)	S S	9.99 6.99		pumping curls hyper charged	150ml	085-3838	14.83(6)			3
protective tan spray spf14	200ml	275-7847	38 97(6)	S	[1] 99		sculpting mousse shaping mousse	200ml 200ml	000-6551 000-6544	14.83(6) 14.83(6)	S		3
spf8 self tanning lotion	200ml	275-7821	35.40(6)	S	9 99	•	styling creme styling gel		024-9326 000-7567	14 83(6) 14 83(6)	S		a a
spl8 sell tanning mousse	200ml 100ml	275-7870 275-7854	34.56(6) 34.56(6)	S S	9 49 9 49		volumax mousse Studio Line FX	200ml	257-7096	14.83(6)			a
HEAD-EZE (Bray Health & Leisur roll on		264-0654	1.30	S		a	invisi gel extra Studio Line Special FX	150ml	257-7088	14.83(6)	S		C
HEALTHILH E STYLE (Healthil) for the menopause		257-7807		S	2.99	r	out of bed	pot 150ml (ube 100ml	271-0036 271-0044	17.98(6) 17.98(6)			a a
HEALTHPOINT (Dove Marketing electronic accupilincture		227-1831			199 95	d	straight p.	ump 150ml		17.98(6)			a
HOME HEALTH (AAH Pharms)		227-1031		.)	[99.9]	u	1 ATSTOCK (Bray Health & Lei auto-syphon set	L279	019-1908	2.90	S		а
incontinence range bed pad					12		beer float bucket clips	L119	019-1163 019-1171	0.66	S		a J
washable .	60cm 25 27" x 36"	208-8714 208-8722	8.32 15 00	S	12 69 22 95	C C	syphon taps syphon tube	L273 14" L283	019-1221 019-1262	0.39	S S		a
commode	deluxe lolding	208-8755 208-8763	74 50 73.79	S	113 80 112 70	C	uni-syphon set	28" L277 L278	019-1718 019-1775	0.66 2.20	S		a a
	raditional tubular	208-8771 208-8789	52 79 30 80	S	80,60 47 00	C C	winelock holders LIVAMINE (Bioceuticals)	2 L304	019-2005	0.57(2)	S		а
drawsheet lightweigbt		208-8698	1.18	5	1.77	c	tablets tonic for liver		011-8950	7 05	S	12.50	ä
drawsheet PVC heavy duty		208-8706	2 09	s	3.14	ť	LUSTRAL (Plizer) tablets				-		
duvet protector	single double	268-6830 268-6848	4 25 5.65	S	6.37	C C	50mg 100mg	28 28	010-4901 010-4919	16.20 26.51	S S	POM POM	Ĺ
insert pads	king	268-6855	6.50	Š	9 75	C	MANNEX (Bioceuticals) rollette	(1	0.0 =/1/	20120		1 + 7(1)	
double	20's 20's	208-8482 208-8474	1.69 1.01	S	2 99	C	male & female tonic	4.0	036-1022	10.81	S	19.17	a
single mattress protector	king	268-6822	3.30	S	1.66 4.95	C	tonic tablets MEDIDOS (Dudley Hunt)	nO.	011-8992	14 59	S	25 95	J
eveller . I	single double	208-8649 208-8656	2 65 2 95	S	3 97 4 43	C.	Effective January 01 tablet dispenser		036-8134	6.27		11.06	d
mattress sheet heavy duty		208-8680	2 49	S	3.80	C	7 days weekend pack		031-5077 006-8668	5.73 2.30	S	10 09 4 05	a a

		PIP code	Trade '	VAT	Retail				PIP code	Trade V	VAT	Retail	
weekly pack	No.1	006-8643	6.14	S	10.82	a	bahy soothers						
refill MEDIMAX (Dudley Hunt)	No.2	006-8650	4.65	S	8 19	а	assorted colours corn plane	753	015-2199	5 00 (24)			а
Effective January 01 tablet dispenser	large	099-5183	9 67	S	17.04	a	blades drinking straws	1404B P9369	019-3987 269-5997	5.38(10) 0.37	S		c
refill weekend 3 day pack		249-5844 249-5851	7.50 2.89	S	13.29 5.09	a a	first aid dressings mirrors	9993 0111	036-1899 048-4907	5 50(50) 1.75	S		a
MEROCETS PLUS (SSL Internation lozenges	nal) 24	001-6196	7.86(6)	S	2.19 GSL	С	salety pins gold scissors	357	034-1818	4.15(24)			а
MICARDIS (Boehringer Ingelheim) Effective January 02							bahy hairdressing	1212 1230	016-8864 247-7677	10.00(12) 14.50(12)	S		a r
tablets 20mg	28	276-4223	12.60	S	. POM		household multi-purpose	1215 1213	026-3996 208-7674	6.10(6) 5.15(6)	S S		a a
MINACIA (Cedar Health) tablets		270-5572	11.12(6)	S	3.25	С	orange tweezers	1235 1410	247-7685 030-3180	5.85(6) 2.95(12)	S S		r
MONTAGNE JEUNESSE (Montagi Effective January 01	ne Jeune	sse)					Nail Care	1426	204-7298	7.25(12)	S		a
5 minute miracle face tonic orange oil & vitamin C 275-5775	24g 5.		15.12(24)	S	0.99	1	clippers toenail	3706	048-5284	3.25(6)	S		a
soothing dead sea nunerals 275: spearmint & tea tree 275-5783	5791,					1	cuticle trimmers files	3745 2910	033-7022 030-5789	4 65(12) 7.30(24)			a a
NELSON & RUSSELL (Nelson & R cleansing shower treatment	tussell) 200ml		10.62(3)	S	5.95	d	nail bulfer	2914	036-7748	8.15(24)			a
energise 259-8795, purify 259-88 Toaming bath treatment		sh 259-8803	12.42(3)		6.95	d d	4-way phers	1164	247-7487	6.70(12)	S		a
relax 259-8829, sensual 259-883 NERISSA (Bray Health & Leisure)		259-8845				d	cuticle toenail	4006 4001	033-7881 033-5836	14.55(6) 17.20(6)	S S		a a
powder pufts NIX (Bray Health & Leisure)	421	019-0215	0.65	S		a	barrel spring	4002 4003	033-6826 033-6891	34 00(6) 21 50(6)	S		a
styptic pencil NUROFEN (Crookes Healthcare)	548	018-6650	0.78	S	GSL	a	scissors manicure	1100	036-2467	8.00(12)			d
liquid capsules	20	270-8972	27 62/120		5.25 P			1634	041-2791 033-9374	9 35 (12)	S		a
200mg NUTRICIA ANTIOXIDANT FOR!	MULA (Nutricia)	37.53(12)			C	toenail Shm Line	1220	055-9574	7.95(6)	3		a
capsules NUTRICIA BONE FORMULA (No		273-4002		S	/6.99	C	ponytail rings towelling		035-7202	1.50(24)			d
tablets NUTRICIA EFALEX (Nutricia)	120	273-3988	41.04(6)		11 99	C .	side combs	5971 5976	013-6325 015-3072	4.10(12) 3.50(24)			a a
capsules	56 60	227-8042 273-4028	27.36(6) 23.94(6)	S	7.99 GSL 6.99	d c	ORTIS (Cedar Health) Api Regis						
lemon & lime liquid	240 150ml	227-8059 241-6428	63 26(6) 13.68(3)	S	18 49 GSL 7.99 GSL	c c	royal jelly	500ml	005-3371 005-3389	51.15(6) 59.10(4)		14.95 25.95	a a
NUTRICIA EFAMOL PMP (Nutric (evening primrose oil, vitamins & n						1	PANAX GUARANA (Bioceuticals) guarana elixir 1		095-8314	10.11	S	17.88	а
capsules NUTRICIA EFANATAL (Nutricia)	60	273-3970	20.52(6)	S	5.99	C	PELICAN SELECT NEONATAL plain fabric	(Pelican	Healthcare)				
(evening primiose oil, rich fish oil, tablets		E) 273-3962	23.94(6)	S	6.99	l c	cut to lit clear 101600 276-4488, opaque	101602 2	276-4496	58.00(30)	S		
NUTRICIA IRON FORMULA (Nu tablets	tricia)	273-4010	41 04(6)		11.99	c	teddy printed fabric cut to lit			58.00(30)	S		
NUTRICIA MULTIFIBRE FORMI powder	ULA (No		41.04(6)		11.99	į	clear 101601 276-4462, opaque PETAL CLEANSE (Bio-Life Int.)	101603 2	276-4470				1
NUTRICIA MULTIMAN (Nutricia) tablets		273-6429	34 20(6)	S	9 99	c	pet allergen preventative starter pack	350m1	276-4447	61.20(12)	S	8.95	
NUTRICIA MULTIWOMAN (Nutr tublets		273-3947	34 20(6)		9 99	c	pet allergen preventative for cats	350ml	276-3381	5 10	s	8.95	
NUTRICIA PRENATAL (Nutricia) tablets		273-3954	23 94(6)		6.99	c	dogs PORTIA (Bray Health & Leisure)	350ml	276-3399	5.10	Š	8.95	•
OLIVE (Bray Health & Leisure) baby bottle teat	007	215-5754	2.774(11)	9	0.77		Effective December 13 animal wool	10g x 9	031-1886	0.59	S		a
wide mouth latex baby weigher	P751	264-0662	2 00(18)	S		C	25g	1000g	031-2017 022-4220	18.25	S S		a
complete back hrush	20	028-8092	9 60	S		đ	applicators box of 864	14	017-3724	3.35	S		a
wood	P783	247-6901 028-6914	1 66	S		a	arm sling NHS baby weigher	16	045-0866	1.60	S		a
blackhead remover bottle hrush 9in	38 54	022-4311	5.60(12) 0.53	S		d a	hammock	21	028-8076	2.20	S		d
cosmetic latex sponge wedges	1069	247-6935	190(h)	S		a	spring balance blackhead remover	36	028-6518 028-6757	7.15 28.00(100			d
eye shades anti-glare	165	037-0940	1.40	S		a		37	022-4287	3.70(10)	S S		d d
eyeshadow applicators eyeshields sports	1066 530	247-6927 247-6950	2,60(12) 1,29	S		a	breast relievers 20z/60ml	45	020-1400	5.10	S		a
anglers facial buffers	531	247-6943	1.35	S		a	4oz/120ml	46 43	044-3812 044-3846	3.85 5.45	S S		a
lootah false finger nails	1360	018-7112 247-6976	6,80 3.80(12)			d a	breast shield 3"	47 49	044-3838 264-0712	4.75 2.68	S S		a a
hair removing mit Ioofah pad	117 251	031-4625 018-7963	5.50(12) 0.95	S		d d	caustic applicators						
mirror 2-way large	0118 0117	247-7354 247-7370	10.50 1.95	S S		d d	75%	82	045-0874	32.00(100	S	P	a
narl brush plastic	69	031-3171	0.40	S		Г	95%	83	011-5105	37.00(100	S S	. P	a
nailstone powder puff	332 1045	031-3437 247-7644	6.00(10) 2.60(12)	S		a a	douche cans douche fittings	122	003-7606	0.95	S		ä
cotton/satin pram hooks	422/D 755	025-5232 247-6893	0.47 6.70(24)	S		r a	polypropylene set	120 121	047-0252 003-7580	2.45 4.85	S S		a a
pumice stone mouse hoxed	434/D	036-2194	0.64	S		а	douche tube dropper bottles	125	028-7219	0.97	S		a
mouse shape teething rings	430 590	037-1211 004-3745	0.48 1.90(12)	S		a	10ml x 25 20ml x 25	40 41	028-6989 028-7136	10.00 10.00	S S		a a
tooth picks plastic							enema syringes complete boxed	150	010-4109	5.05	S		a
x 30 tweezers	623	037-1443	0.63	S		а	eye bath eye bath box of 12	155 156	028-8878 002-2806	0.53 1.40	S S		a a
flat plastic Cosmetic Brushes/Accessories	632	031-4393	0.90	S		d	eye bath NHS eye droppers	154 133	023-7594 045-1500	0.09 0.27	S S		a c
pencils nail white	201	036-2566	5 00(12)	S		a	graduated eye shades	135	017-0415	0.90	S		a
Hair Accessories combs	2821	046-6060	2.85(24)	S		а	cockle eye shields	172	026-5488	0.66	S		a
	2822 2823	002-2046 036-1923	2.85(24) 3.55(24)	S S		a	surgical	166 167	004-6227 037-0890	0.16 0.25	S S		a a
	2825 2828	034-6411 023-6851	2.39(12) 1.99(12)	S		a r		171 173	037-0916 037-0924	0.99 0.59	S S		a a
atro	2845 2833	014-2208 029-3530	5.32(12) 3.98(12)	S		a d		174 174/D	037-0908 031-2058	0.60 0.99	S S		a a
pocket tangle hair nets	2846	014-2521	3.55(12)			a	feeding cups earthenware	193 1 90	026-5496 042-9290	3.35 6.99	S S		a a
slumber hairbrushes	324	204-7322	6.70(36)	S		a	polypropylene fingercots	192	047-0260	2.35	S		a
5 row 7-row	1014 1011	247-7040 030-7157	9.75(12) 8.75(6)	S S		a a	100 fingerstalls	197	046-9403	0.30	S		a
	1012 2952	052-6582 029-3126	4.25(6) 2.95(6)	S		a	blue plastic tape wrist tres	207	028-9710	1.14(10)	S		a
ladies cylindrical handbag	2953	017-1736	4.00(6)			a	Easifix natural plastic	206	044-8282	4.32(12)			a
hairpins Hair Decorations	P3406	264-0696	3.90(12)			a	tape wrist ties	210 212	017-1637 028-9462	1.29(12) 1.14(10)			a a
headband	2431 92432	023-0136 094-0668	4.80(6) 5.80(6)	S S		d c	plastic blue with tape ties		031-2827	1.29(12)			a
Miscellaneous							simulated leather						

		PIP code	Trade V	AT	Retail				PIP code	Trade	VAT	Retail	
tupe wrist ties	203	017-1629	2.80(12)	S		a	sport	125 1	274 1050			0.00	
manicure sticks bundles of 5	361/4	017-0829	0.20	ς		d	sp[30] suncare milk	125111	276-4058		S	8.99	•
measures - dispensing stamped							lace spl 20	50ml	237-3033		S	4.95	d
100ml		017-6628 017-6701	14 50 15 30	S S		น น	low irritant	125m1	227-7291		S	7 95	d
10m!	267/10	017-6552 017-6560	11.80	S S		i) d	spt 20 sport	200ml	227-7309		S	11.95	d
250ml	267/250	017-6719 017-6727	18 00	S S		d	spl 20	50ml 125ml	237-3009 227-7283		S	4,95 7,95	d
25ml	267/25	017-6594	11.25	S		a	toddler						
500ml	270/500	017-6750 017-6925	22 50 24 20	S S		a	spl 30	50ml 200ml	227-7341 227-7325		S	4 95 10 95	d
50ml	267/50 270/50	017-6602 017-6610	12 40 14 50	S S		a a	ultra	400ml	237-3066		S	18.95	d
5ml medicine tumblers	267/5	017-6529	10-15	S		ä	spl 30	200ml 400ml	227-7317 237-3058		S	10 95 18 95	d d
50ml menthol cones	276 260	017-4052 037-1062	0.62 0.68	S S	GSL	a a	toddler milk spt50	50ml	276-4074		S	5.49	
	319/0000	264-0738	5.45	S		a	ultra	125ml	276-4066		S	8,99	٠
No.0 142mm No.2 284mm	319/0 319/2	033-0316 033-0449	5.75 9.75	S S		a a	Sp160	50mt 125mt	276-4033 276-4025		S	5.49 8.99	
No.3 Nelson's inhalers	319/3	031-3163	13.90	S		ü	SUNTONA (Bray Health & Leisi after tanning preparations						
spare mouthpiece	221	032-8948	1.98	S			milk moisturiser anti-glare	150ml 575	032-7528	1.15	S		a
with corks nipple shields	352	031-3726	1,39	S		a	eye shades	165	018-6445	1.40	S		a
polypropylene pessaries	356	037-1146	0.53	S		1	UVA Tanning preparations gel	150ml 571	003-9065	1.15	S		a
poly NHS pvc NHS	365 366	025-6024 025-6040	1 64 1 77	S		a a	lotion gold De-Luxe	150m1 574	003-9628	1.15	S		a
sediment jars spirit lamp	448 483	044-4257 031-3999	6.20 5.12	S S		d d	SUPER ZINC-C (Bioceuticals) lozenges	30	002-5981	2.19	S	3.94	a
support tennis elhow	(500)	027-6097	2 15	S		a	SUPER-MA (County Chemicals) cream cleaner		276-4777	7.25(12	S .		
supports universal	553	041-2510	1.95	S		d	TEMODAL (Schering-Plough) capsules						
supports abdominal large	550/XL 550/L	020-4669 047-0328	3,00 2,90	S S		a a	5mg 20mg	20 20	260-1482 260-1508	69,20 276.80	S	POM POM	d
medium small	550/M 550/S	047-0310 047-0302	2 90 2 90	S S		a	TEXAS (Cory Bros) Joam straps						
suspensory bandage NHS	556/XXL	037-1419	1.95	S		a	5-7306 100	Lin	014-1507	22.60	S		d
ex.large large	556/XL 556/L	037-1401 037-1393	1.83 1.70	S S		a r	incontinence sheaths 5-7303		031-6596	111 00	S		d
small syringes, aural	556/S	037-1377	1 65	S		a	5-7313 UNICARE (ICN Pharms)		031-6570	8 64	S		d
ear NHS	570/2	004-3588 264-0746	1.64 3.30	S S		a	Effective January 01 contact lens solution						
tongue depressors triangular calico handage	618 627	264-0753	1.04	S		d	all-in-one travel size	60ml	174 1755	145	S	2 99	٠
urinals male plastic with lid		029-8133	4.75	S		a	blue soft leus 276-4363, gree UNITEN (Tyco Healthcare)	u nura reus 2	70-4333				'
wrist straps leather	660 665	037-1583 037-1567	1 34 1 15	S S		a a	absorbent mattress protector	single	244-0675	31.50(3)	S	18.99	C
Nail Care emery boards							lames protection briefs with						
Hem x 5 15cm prof x 5	308 9306	083-9001 034-1008	3.05(24) 5.20(12)	S		c a	integral pad 36-41" 244-0626, 42-47" 24-	4-0634, 48-5,	3" 244-0642	18 21(3)	S	10.99	C
17 5cm prof x 5 REVIFACE (Medestea)	6535	088-8180	5.80(12)	S		a	Paula protection briefs with						
Effective January 01 anti-wrinkle formula							integral pad size 12-14 244-0592, size 16-	-18 244-0600	, size 20-22 2	16.56(3). 44-0618	S	9 99	C
capsules REVLON (Revion)	4()	276-3274	51.21(3)	S	29.95	•	waterproof mattress protector	single	244-0568	22.71(3)	S	13 69	C
FRAGRANCES Charlie Gold							UNITEX SIR (Tyco Healthcare)	double	244-0576	33 18(3)	S	[9 99	C
body spritz Charlie Original	J00ml	276-4314	3.84	S	6.95	٠	neontinence pants vize 1 034-9944, 2 034-9597		5 035-0165		8	9/2	c
hody spritz Charlie Red	[00m]	276-4306	3 84	S	6.95	٠	VADEMECUM (Dent O Care) moutbwash		034-7591	24.70(12)	S	3.65	a
body spritz Charlie Silver	[00m]	276-4280	3.84	S	6.95	•	toothpaste VECTAVIR (Novartis Pharms)		010-3028	15 00(15		1 75	ü
body spritz Charlie Urban Energy	100ml	276-4322	3.84	S	6.95	٠	cream VIBRAMYCIN (Plizer)	2g	231-2841	4.20	S	POM	C
body spritz RICOLA. (Cedar Health)	100mI	276-4298	3.84	S	6.95	٠	cupsules 50mg	28	005-6036	7 74	S	POM	С
sugar free lozenges	50g		20.30(20)	e e	1.59		100mg VIBRAMYCIN ACNE PACK (8	030-2422	4 18	S	. POM	C.
orange mut 082-6560	gur.		20/30(20)		1 34	d	(distributors Trinity Pharms)	r iizei j					
ROTA-DENT (Dent O.Care) electric toothbrush		097-9013	4.95		(30)		capsules 50mg	56	243-7135	17.80	S	POM	C
replacement neck ROYAL LIFE (Bioceuticals)		(141-4017	4 90	S	6.29	ä	VIBRAMYCIN-D (Plizer) dispersible tablets		/WW 11112	Lou		DOM	
multi-vitamins KH97 tablets	30	032-5928	481	S	8.56	a	VITASPA (Keyline Brands)	8	006-0103	491	S	POM	C
POMAIN APPOR	60 100	040-0226 011-2706	8 64 13 07	S S	15.44 22.27	a a	extoliating cleansing bar hydrating body lotion	100g 200ml	242-7284		S	4 95 9 95	d
SCHAR (UDG) gluten free foods		37. 2			1.00		invigorating body spray moisturising body bar	200m] 100g	242-7177 242-7268		S	9,95 4.95	d
brown bread ertha-sliced white bread sliced	250g 2 x 200g	276-2805 276-2813	1.41 2.15	Z	1.88 2.87	•	pampering bath & body oil relaxing bath salts	200ml 500g	242-7128 242-7318		S	9.95 13.50	d
SEA-CAL (Bioceuticals) oystersbell calcium with							ultimate bath & shower gel WELEDA (Weleda)	200m]	242-7102		S	9.95	d
vitamin D tablets SECURE (Dent O Care)	50	035-1742	4 86	S	8 46	d	Effective January 01 buby care						
denture adhesive super bold	40g	032-5167		S	3,95	d	calendula range baby lotion	150m!	244-3125	2 69	S	4.40	a
denture cleansing tablets lower denture adbesive strips	32 15	032-5514 234-0610		S S	2.95 3.95	u a	baby moisturiser baby oil	75ml 100ml	205-1522 205-1506	2 69 3 22	S S	4.40 5.25	a a
SERAVIT (SHS) Renal Paediatric							haby powder haby soap	75g 100g	205-1498 205-1530	1.53(6) 2.21	S	2.50 3.60	a a
dietary supplement trace element & vitamin mix	200g	022-6233	13 60	7		d	nappy change cream bath & body care	75ml	205-1514	2 69	S	4.40	a
SOLO-CARE (CIBA Vision) hard lens case		212-9880	1,99	S	2.93	d	calendula massage balm	50m!	276-4140	2 44	S	4.10	ı
bard lens solution soft lens solution	240ml 240ml	212-9872 263-5092	4.46 4.25	S S	7 49 8 49	a a	citrus range	100m!	276-4132	4 05	S	6.80	i
+ lens case travel pack	5×10ml 10×10ml	276-4678 276-4686	1.78	S	2.99 3.99	1	bath milk body tone lotion	100ml 75ml	205-1639 205-1589	2.69 2.69	S S	4 40 4 40	J H
SOMERSETS (David Somerset) shaving oil	12ml		1.98	S	3.50	d	deodorant	30ml 100ml	070-9394 003-6756	1.35	S	2.20	a
extra sensitive 276-4108, heav original 026-4499,		5-4116,				1	skin cream Toot halm	30ml 75ml	205-1621 046-1814	2.69	S	4 40 4 40	a a
for men 056-5192 SUNSENSE (Lagap Pharms)						d	herbal range deodorant	30mf	070-9402	1.35	S	2.20	a
duily face	75g	246-3800		S	8,95	d	lavender range	100ml	029-1351	2.69	S	440	d
spt60 low irritant	75ml	276-4017		S	8.99		bath milk mens range	100ml	207-1249	2.69	S	4.40	a
spf20	125ml	276-4041		S	8 99	٠	alter shave balm	100ml	238-6142	35.52(6)	S	9.65	ü

		PIP code	Trade	VAT	Retail				PIP code	Trade	VAT	Retail	
after shave lotion	100ml	238-6134 238-6159	35.52(6)	S	9.65 9.65	a	30	125	028-7946	2.20	S	4.45	a
ean de cologne shaving cream pine range	100ml 75ml	238-6126	35.52(6) 16.20(6)	S	4.40	a	Euphrasia 6 30	125 125	006-0277 028-8100	1.83 2.20	S S	3.70 4.45	a
hath milk rose range	100ml	207-1256	2.69(6)	S	4.40	d	Ferrum Phos	125	006-0285	1.83	S	3.70	a
rose cream rose soap	30ml 100g	238-1374 238-1457	4.68 4.68	S	7.85 7.85	a a	30 Gelsemium	125	028-8134	2.20	S	4.45	a
wild rose body oil rosemary range bath milk	100ml 100ml	238-1390 207-1264	9 37	S S	15.75 4.40	a	6 30 Completes	125 125	039-4908 028-8167	1.83 2,20	S S	3.70 4.45	a a
soap skin loid	100ml 75ml	207-1272	2.69	S S	3.60 4.40	a a a	Graphites 6 30	125 125	006-0400 028-8456	1.83(3) 2.20	S S	3.70 4.45	a a
wild rose range body lotion	[00m]	238-1432	9 37	S	15.75	a	Hamamelis 6	125	006-0426	1.83	S	3.70	a
Cough & tonic cliviry Birch Blu Library	200ml 200ml	010-8241 010-9454	3.66 3.66	S S	6.15 GSL	a	30 Hepar Sulph	125	028-8506	2.20	S	4.45	ä
Blackthorn cough	100ml 200ml	016-5597 010-9561	2.15 3.04(6)	S	6.15 GSL 3.60 GSL 5.10 GSL	a a a	6 30 Hypericum	125 125	006-0442 028-8530	1.83 2.20	S S	3.70 4.45	a
Herb & Honey	100ml 200ml	091-6445 010-9629	2 15 3.04	S S	3.60 GSL 5.10 GSL	a	6 30	125 125	039-4916 028-8555	1.83 2.20	S S	3.70 4.45	a a
Sandthorn dental care childs tooth gel	200ml	010-9777 245-0377	4 29 5.88(6)	S	7.20	a	Ignatia 6 30	125	039-4924	1.83(3)		3.70	a
natural toothpaste eventual ords	50ml 75ml	205-1993	6.96(6)	S	1.90	a	Ipecac 6	125	028-8647 039-4932	2,20	S S	4.45 3.70	a
aniseed clove	10ml 10ml	207-1306 207-1348	2.57 2.57	S S	4.20 4.20	a a	30 Kali Bich	125	028-8670	2.20	S	4.45	a
eucalyptus gerunium grapefruit	10ml 10ml 10ml	207-1355 207-1363 207-1371	2 57 2 57 2 57	S S S	4.20 4.20 4.20	a	6 30 Kali Phos	125 125	006-0483 028-8746	1.83 2.20	S S	3,70 4.45	a
lavender Jemon	10ml 10ml	207-1371 207-1389 207-1397	2.57 2.57 2.57	S	4.20 4.20 4.20	a a a	6 30	125 125	039-9675 028-8829	1.83 2.20	S S	3.70 4.45	a
lime orange	10ml 10ml	207-1405 207-1413	2.57 2.57	S	4.20 4.20	a a	Lachesis 6	125	002-3184	1.83	S	3.70	a
peppermint pine	10ml 10ml 10ml	207-1439 207-1447 207-1454	2.57 2.57 2.57	S S	4.20 4.20 4.20	a a a	30 Ledum 6	125 125	276-4181 002-7797	2.20	S	4.45 3.70	ı a
rosemary sage sweet almond	10mi 100ml	207-1454 207-1462 207-1496	2 57 2.57	S S	4 20 4.20	a a	30 Lycopodium	125	276-4199	2.20	S	4.45	I
tea tree	500ml 10ml	207-1504 267-1295	6 44 2 57	S S	10.50 4.20	a a	6 30	125 125	006-0566 028-8910	1.83 2.20	S S	3.70 4.45	a a
ylang ylang han care conditioner	10m1	207-1488	2.57	S	4.20	а	Merc Sol 6 30	125 125	041-3732 028-9009	1.83 2.20	S S	3.70 4.45	а
calendula lemon halm	250ml 250ml	244-3133 238-6100	1 90 1 90	S S	3.10 3.10	a a	Mixed Pollen 30	125	045-3092	2.20	S	4.45	a
rosemary hair lotion	250ml	016-6405	1 90	S	3.10	ä	Nat Mur 6	125	041-5844	1.83	S	3.70	a
rosemary shampoo calendula	100ml 250ml	205-1670 041-7535	2.57	S S	4.20 3.10	a a	30 Nux Vom 6	125	028-9017 041-5851	2.20 1.83(3)	S S	4.45 3.70	a
chestnut lemon halm	100ml 250ml	205-1647 238-6092	2.57 1.90	5 S	4.20 3.10	a a	30 Phosphorus	125	028-9025	2.20	S	4.45	a
rosemary	100ml 250ml	205-1662 017-5844	2 57 1 90	S S	4.20 3.10	a a	6 30	125 125	041-8095 028-9108	1.83 2.20	S S	3.70 4.45	a a
homocopathic medicines tablets Aconite							Phytolacca 6 30	125 125	002-7805 276-4207	1.83 2.20	S S	3.70 4.45	a
6 30	125 125	036-2616 028-7706	1.83 2.20	S S	3.70 4.45	a a	Puisatilia 6	125	041-9457	1.83	S	3.70	a
Actaea Rac 6 30	125 125	006-0236 028-7714	1.83 2.20	S S	3.70 4.45	a a	30 Rhus Tox 6	125	028-9298 041-9531	2.20	S S	4.45 3.70	a
Allium Cepa 6	125	048-6530	1.83	S	3.70	a	30 Ruta Grav	125	028-9645	2,20	S	4.45	a
Apis Mel 6 30	125 125	036-8480 028-7722	1.83 2.20	S S	3.70 4.45	a a	6 30 Sepia	125 125	042-3343 028-9652	1,83 2,20	S S	3.70 4.45	a
Argent Nit	125	037-0122	1.83	S	3.70	a	6 30	125 125	006-0574 028-9769	1.83 2.20	S S	3.70 4.45	a a
30 Arnica 6	125	028-7730 037-0189	2.20	S S	4.45 3.70	a	Silicea 6 30	125 125	042-3350 028-9777	1.83 2.20	S S	3.70 4.45	a a
30 Arsen Alh	125	028-7748	2.20	S	4.45	a	Sulphur 6	125	042-3376	1.83	S	3.70	a
6 30 Belladonna	125 125	037-0197 028-7763	1.83 2.20	S S	3.70 4.45	a	3() Symphytum 6	125 125	028-9785 003-3621	2.20	S S	4.45 3.70	a
6 30	125 125	037-2276 028-7771	1.83 2.20	S S	3.70 4.45	a	30 Thuja	125	276-4215	2.20	S	4.45	1
Beilis Perennis 6 Bryonia	125	042-3368	1.83	S	3.70	a	6 30 Urtica Urens	125 125	006-0699 028-9819	1.83 2.20	S S	3.70 4.45	a
6 30	125 125	037-2292 028-7789	1.83 2.20	S S	3,70 4,45	a a	6 30	125 125	040-9615 276-4231	1.83 2.20	S S	3.70 4.45	a i
Cale Carh 6 30	125 125	037-3423 028-7797	1.83 2.20	S S	3.70 4.45	a u	natural medicines arnica massage balm	50ml 100ml	020-0287 028-2319	2.44 4.05	S S	4.10 6.80	a
Calc. Fluor 6	125	028-9827	1.83	S	3,70	a	compounds Avena Sativa	25ml	028-7045	2.77	s	4.65 GSL	a
30 Calc. Phos 6	125	028-7805 028-9835	2.20	S	4.45 3.70	a	Melissa Conchae 5% Comp tablets	25ml 100	027-8556 028-7458	2.77	S S	4.65 GSL 4.90	a
30 Cantharis	125	028-7862	2.20	5	4.45	a	drops Chamomilla 3X	25ml	001-1015	2.59	S	4.35 GSL	a
6 30	125 125	037-3431 028-7904	1.83 2.20	S S	3.70 4.45	a a	Fevertew 6X Infludo	25ml 25ml 25ml	017-4060 207-1900 207-1991	2.92 3.99 3.99	S S S	4.90 GSL 6.70 POM 6.70 POM	a
Carho Veg 6 30	125 125	038-2739 028-7912	1.83 2.20	S S	3.70 4.45	a a	Pertudoron 1 Erysidoron 2 tablets lotions		029-0338	2.92	S	4.90	a
Causticum 6	125	001-5313	1.83	S	3.70	а	Amica	50ml 500ml	028-6997 207-1512	2.77 13.49		4.65 22.65	a
30 Chamomilla 30	125	276-4157 001-5099	2.20	S	4.45	l Ji	Calendula Combudoron Larch Resin	50ml 50ml 50ml	028-7227 028-7292 028-7557	2.77 2.77 2.77	S S	4.65 4.65 4.65	a a a
Cina 6	125	001-5107	1.83	S	3.70	a	massage balm Calendula	500m!	207-1538	17.87	s :	30.00	d
Cocculus 6 Coffea	125	001-9448	1.83	S	3.70	а	medicinal gargle Mercurius Cyanat 4X ointments	50ml 25ml	207-1934 207-1959	2.77 3.99	S S	4.65 6.70 POM	a
6 30	125 125	002-2897 276-4165	1.83 2.20	S S	3.70 4.45	a i	Amica Calendolon	25g 25g	029-7911 006-0210	2.29 2.29	S S	3.85 3.85	a a
Colocynthis 6 30	125 125	002-3010 276-4173	1.83 2.20	S S	3.70 4.45	a	Combudoron Copper Hypericum/Calendula	25g 25g 25g	028-7342 027-6709 017-4243	2,29 2,29 2,29	S S	3.85 3.85 3.85	a a a
Cuprum Met 6	125	006-0244	1.83	S	3.70	a	Larch Resin Rhus Tox	25g 25g	028-7623 017-4318	2.29 2.29	S S	3.85 3.85	a a
30 Drosera	125	028-7938	2.20	S	4.45	a	Ruta Phosphorus/Tart	25g 25ml	018-1602 207-2015	2.29 3.99	S	3.85 6.70 POM	a
6	125	006-0251	1.83	S	3.70	a	pillules						

		PIP code	Leade	$\nabla\Delta^{\prime}i$	Retail				PIP code	Trade	VAT	Retail	
Information (027-6584	2.50	8	4.35		at home	:00	107-2056	3 00	8	6.70 P	
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This is how clear our new stop smoking patches are

	Agric				6.70 [1		1 SC / please State Alim	in ISC had					
1.60	-10	101,000			4.65 P		Vn						
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		SM00 0841			4.65 P		intensive conditioner	175mil	242-7680			100	
							ZIMOVANE (Avenus Photo)						
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							7 Smg	100	214 1547	15,000		POMHI	12
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	All			5	3.85 P		ZITHROMAX (Phyer)						
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					3.85 P		250mg	1	DD8 3535	8.95		POM	
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						_	suspension					LOM	
				S	4.90 P	а	200mg/5ml		008 3618			POM	
				S	4.90 P	a	200 ang 2000	No.	DD8 3659		- 0	POM	
				S	4.90 P	a		Juni	D08 3667			POM	
				S	4.90 P	a	tablets					POM	
	100/3	011 5441		S	5.30 P	a	500mg		253-4097			100104	
				.,	DID'T	· ·	-AARTIE		_ 111-011977			POM	

Amendments to list of Manufacturers and Distributors

Aspects Beauty Company (aide 1655)	į.
Balneath Manor South Charley	
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Dentannese UK Ltd	(
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Derck Grain Contracts Ltd (Code 123) Unit 8 Aw worth Road Trading Estate Awawith Road Illeston Desloy In - DE7 8HX Let III 15 93 3 437 Lu DI 15 96 3442 Lunal deal grantidiet 1kg com	d
Dove Marketing Ltd (Code 3698) 12 Wolfe Close Parkeate Burme (Park Nutstord Cheshine WATG 8X1 1/2 O 508 6 32/30 Liv O 508 632/30	d
Invicta Pharmaceuticals (Code 1830) Rammate Road Scalavelt Kent C.J. (901) J.J. III 304 (1616) Lay 61 304 (1622)	d
Medik International Ltd (Cc de 491) Out 2 Crystol Wave Fin Grove Road Harrow Modifices (EA) 2419 Tel 10208 Mos 4498 Tax 0.208 126 1766 Final median ternation decoration	
Nelson & Russell (Code 1076) Broad eath Hou 8 C Parksrde London NW 19 SLP Le 0208 & Fo 1.3 (I O der 1.12 0800 399 1 Eac 0203 200 389 3	
Richborough Pharmaceuticals Div. of Plizer Ltd (Code 2000) Ramasate Road Sandwigh Lent CT13 381 Tel 01304 offold Fix. 01304 offold	
Videom Marketing Ltd (Code 264) 236 Cricklewood Line London NW2 2Pt1 Tel 020-8880 1080 Eas 020-8800 0338 Email videomik@and.com	



		PIP code	Trade	VAT	Retail			PIP code	Trade	VAT	Retail	
nuce allow buttons	0000	*15-6134	35.52(6)	5	960	. 41	125	028-7946	2.20	S	4.45	
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111/14/011 1 1 1/111			H 20(b)	5	4.40	0		006-0277	1.83	S	3.70	
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								006-0285	1.83	S	3.70	11
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	11/14/01	207-1272	2.21	S	3.60		1425	006-0400	1.83(3)	S	3.70	-1
		238-6118	2.69	S	4.40	100	175	028-8456	2.20	S	4.45	
						410 (40)						
	Duml	238-1432	9.37	S	15.75		125	006-0426	1.83	S	3.70	a
and the state of t						3.7	125	028-8506	2.20	S	4.45	а
	200mt	010-8241	3.66	5	6.15 U.St	Jojen Sulpi.						
to the contract of the contrac	200m1	010-9454	3.66	5	6.15 GST	6	125	006-0442	1.83	S	3,70	i i
	100ml	016-5597	2.15	5	3,60 GST	5()	1.25	028-8530	2.20	S	4.45	1)
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This is how clear our new stop smolding patches are

		207 348					Kali Bich						
10-0400	10ml 10ml	207 1355 207 1363					6 30	125	006-0483 028-8746	1.83	S	3.70 4.45	a a
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http://www.	ECHNOLING CO.	'r. 1*				0.00	Lachesis 6	125	002-3184	1.83	S	3,70	d
epperanon	Films	10 1120	164			0	30 Ledum	125	276-4181	2.20	S	4.45	Ī
Park Company	1100					- 1	6	125	002-7797	1.83	S	3,70	al.
orac cultural	1000	(1) - to			1.50	0	30 Lycopodium	125	276-4199	2.20	S	4.45	- 1
			will				6	125	006-0566	1.83	S	3.70	-1
to I for whom them	1000	01 00 F	167		1.77		30 Merc Sol	125	028-8910	2.20	S	4.45	.1
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onomickolari Occupy		- 100 P	1 90 57	S	3.10 4.20	a u	Phosphorus 6		011-8095	1.83	S	3,70	il
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Total Control	1250	0.07_016	1.83	S	3.70	a	30 Pulsatilla	125	276-4207	2.20	S	4.45	- 1
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Apr. Mc		036-8480	1.83	ς	3.70	a	6 30	125	042-3343 028-9652	1.83 2.20	S S	3.70 4.45	a a
TO Account No.	100	028-7722	5 30	5	4.45	-1	Sepia 6	1,5	()()6-()574	1.83	S	3.70	
		037-0122	1.83	S	3.70	-1	30	7.5	028-9769	2.20	S	4.45	1
		028-7730	2.20	5	4.45	-1	Silicea 6	125		1.83	S	3.70	
6 30		037-0189 028-7748	1.83 2.20	5	3.70 4.45	J.	30 Sulphur	125	028-9777	2.20	S	4.45	
		1)37-()197	1.83	5	3.70		6 30	125 125	042-3376 028-9785	1.83 2.20	S	3.70 4.45	
		028-7763	2 20	S	4.45	a) .l	Symphytum						
I o c	125	037-2276	1.83	S	3.70	.1	6 30	125 125	003-3621 276-4215	1.83 2.20	S	3.70 4.45	1
		028-7771	2.20	S	4.45	J	Thuja 6	125	006-0699	1.83	S	3.70	
		042-3368	1.83	S	3.70	h	30	125	028-9819	2.20	S	4.45	a a
	1-	037-2292	1.83	S	3.70		Urtica Urens 6	125	040-9615	1.83	S	3.70	a
1 00 1		028-7789	2.20	5	4.45	-0	30) natural medicines	125	276-4231	2.20	S	4.45	1
		057-3423	1.83	S	3.70		arnica massage balia	50ml	020-0287	2.44	S	4.10	
1 10 1 000		1.777	2.20	S	4.45		compounds	100ml	028-2319	4 05	8	6,80	d
		U 21/27	1.83	5	3.70 4.45	+1 +1	Avena Sativa Melissa		028-7045 027-8556	2.77 2.77	S	4.65 GSL 4.65 GSL	a a
F (p) 1940							Conchae 5% Comp						
			9	5	3.70 4.45	al U	tablets drops		028-7458	2 92	S	4.90	a
C.11101 - 1					3,70	J	Chamomilla 3X Feverlew 6X	25m1 25m1	001-1015 017-4060	2.59	S	4.35 GSL 4.90 GSL	a a
100		003/0000			4.45		Infludo	25ml	207-1900 207-1991	3,99	S	6.70 POM 6.70 POM	a
· What Ve !		MAL FOR			3.70		Pertudoron 1 Erysidoron 2 tablets	25m1 100	029-0338	2.92	S	4.90	a a
Am one		Operated.			4.45		lotions Arnica	50mL	028-6997	2 77	S	4.65	а
0		70121	- 10		3,70			500m1	207-1512	13.49	5	22.65 4.65	all
1 company of a					4,45		Calendula Combudoron	50mI	028-7227 028-7292	2.77 2.77	8	4.65	a a
					4.45		Larch Resin	50ml	028-7557	2.77	5	4.65	a
			1.85		3,70		Calendula medicinal gargle	500ml 50ml	207-1538 207-1934	17.87 2.77	S S	30.00 4.65	d a
midin of the	VA.	48	1.83		3.70		Mercurius Cyana (4X)	25m1	207 1959	3.99	Š	6.70 POM	a
(JULIUS		97	1.83		3,70		Omtments Arms I		029 7911	2.29	S	3.85	al
		65	2.20	4	4.45		Chendel II Combudoron	258 258	006-0210 028-7342	2 29	S	3,85 3,85	ü d
		10	1.83	5	3.70		edite.		027-6709	2.29	S	3,85	a
		7.3	2.20	5	4.45		Hapenetical desdala Laich Resin		017-4243 028-7623	2.29	S	3.85 3.85	d d
		44 38	1.83	S	3.70 4.45		Rhus Tox Ruta	25e 7 m	1017-4318	2.29	5	3.85 3.85	d at
				S			Phosphorus/Tant	Soil	207-2015	3,99	S	6.70 POM	-1
			1.83	S	3.70		pillules						

	PIP code	Trade	VAT	Retail				PIP code	Trade	VAT	Retail	
15g	027-6584	2.59	S	4.35	a	Scleron	100	207-2056	3 99	S	6.70 P	a
7g	207-1637	2.77	S	4.65 POM	6	Vitis Co	100	207-2064	3 99	S	6.70 P	1
						skm care						
30ml	070-9311	1.61	S	2.70	a							
												a
												a
												a
							30m1	205-1456	3.56	- 5	2.80	31
												3
												a
												a
							[00m]	238-6167	2.73	S	4.45	9
												а
												a
												а
100	207-1967	3.16	S	5.30 POM	J							- 1
							7ml	217-2963	2.69	S	4.40	a
25m1	207-1587	3,99	S	6.70 P	3							
							75m1	217-2948	2.69	S	4 4()	a
					a							
					J							a
25ml		3 99			3	deep cleanser	100ml	022-5896	2.14	S	3.50	a
25m1	029-0163	2.77	S	4.65 P	a	WELLAND (Clinimed)						
						Colostomy						
25g	029-0148	2.29	S	3.85 P	a	closed pouch						
25g	029-0379	2.29	S	3.85 P	a	with filter	30		62.45	S		
						clear, 10mm starter hole FSC	410 (195-59	97, 25mm FSC	425 (195-6	003,		d
25ml	207-1561	3 99	S	6.70 P	a	32mm FSC432 095-6011, 38n	nn ESC438	050-1395, 446	nm FSC44	14 (053-0	998,	d
25m1	207-1595	3.99	S	6.70 P	ü	51mm FSC451 088-9659, 60n	un ESC460	050-1353				d
25ml	207-1603	2.77	S	4.65 P	a	Vogue						
25ml	207-1629	2 77	S	4.65 P	a	dramable pouch						
25ml	207-1645	3,99	S	6.70 P	a	shorter length	30		56.34	S		
25m1	207-1926	3.99	S	6.70 P	a	clear, 19mm starter hole VOI	719 220-1	408,				d
25ml	207-1942	2.77	S	4.65 P	a	25mm VOD 725 220-1424, 29	hnm VOD 7	29.260-9949,				d
25m1	207-2007	3 99	S	6.70 P	a	32mm VOD 732 220-1416, 35	mm VOD 7	35 260-9956,				d
25m1	207-2031	2 77	S	4.65 P	a	38mm VOD 738 220-1432, 44	mm VOD 7	44 220-1440,				d
25m1	013-9444	16.62(6)	S	4.65 P	a	51mm VOD 751 220-1457						d
25m1	207-2049	3.99	S	6.70 P	a	ZERO FRIZZ (Keyline Brands)						
25ml	207-1611	2.77	S	4.65 P	a	intensive conditioner	175ml	242-7680		S	4.95	d
						ZIVIOVANE (Aventis Pharma)						
30g	019-0140	16.62(6)	S	4.65 P	a	tablets						
						7.5mg	100	214-1547	16.00	S	POMHP	, d
25g	028-9892	2.29	S	3.85 P	a	ZINCOSOL (Bioceuticals)						
	028-9934	2.29	S	3.85 P	a	tablets	50	034-9795	4.86	S	8 46	d
	012-7381			3.85 P								
							4	008-3535	8 95	S	POM	(
							6					c
						suspension						
100	028-6591	292	S	J.90 P	а		15m1	008-3618	5.08	S	POM	C
			S			with the same of t						ć
												C
100	028-7482	2 92	Š	4.90 P	a	tablets	30000	100000000000000000000000000000000000000	1,3,007	.3	. rom	
	207-2023	3.16	S	5.30 P	LI.	ULL/IL UT			10.99	S	POM	
	7g 30ml 100 100 50 100 100 100 100 100 100 100	7g 207-1637 30ml 070-9311 100 027-6519 100 028-7052 50 000-3178 100 027-6568 100 207-1536 100 207-1536 100 207-1539 125 017-1579 100 028-7490 100 207-1518 100 028-7656 100 027-1918 100 028-7656 100 027-1918 100 028-7656 100 207-1967 25ml 207-1520 25ml 207-1520 25ml 207-1978 25g 029-0163 25g 029-0148 25g 029-0163 25ml 207-161 25ml 207-161 25ml 207-1629 25ml 207-1629 25ml 207-163 25ml 207-163 25ml 207-163 25ml 207-161 25ml 207-161 25ml 207-161 25ml 207-161 25ml 207-161 25ml 207-1629 25ml 207-163 25ml 207-161	7g 207-1637 277 30ml 070-9311 161 100 627-6519 2.92 100 028-7052 2.92 50 000-3178 215 100 027-6568 2.92 100 207-1546 2.92 100 207-1546 2.92 100 207-1579 2.92 100 207-1579 2.92 100 207-1589 3.99 100 207-1987 3.99 100 028-7656 2.92 100 207-1987 3.99 100 207-1987 3.99 100 207-1987 3.99 100 207-1987 3.99 100 207-1987 3.99 100 207-1987 3.99 100 207-1987 3.99 100 207-1987 3.99 100 207-1987 3.99 100 207-1987 3.99 100 207-1987 3.99 100 207-1987 3.99 100 207-1988 2.29 100 207-1988 2.29 100 207-1989 2.29 100 207-1989 2.29 100 207-1989 2.29 100 207-1989 2.29 100 207-1501 3.99 100 207-1501 3.99 100 207-1501 3.99 100 207-1501 3.99 100 207-1501 3.99 100 207-1501 3.99 100 207-1501 3.99 100 207-1501 3.99 100 207-1501 3.99 100 100 100 100 100 100 100 100 100 100	7g 207-1637 2.77 S 30ml 070-9311 1.61 S 100 028-7052 2.92 S 100 028-7052 2.92 S 100 027-6568 2.92 S 100 207-1536 2.92 S 100 207-1579 2.92 S 100 207-1579 2.92 S 100 207-1579 2.92 S 100 207-1982 3.16 S 100 207-1983 3.99 S 100 207-1987 3.99 S 25ml 207-1520 3.99 S 25ml 207-157-1975 3.99 S 25ml 207-1587 3.99 S 25ml 207-157-1975 3.99 S 25ml 207-1587 3.99 S 25ml 207-1587 3.99 S 25ml 207-1561 3.99 S </td <td>76g 207-1637 2.77 S 4.65 POM 30ml 070-9311 1.61 S 2.70 100 028-7052 2.92 S 4.90 100 028-7052 2.92 S 4.90 100 027-16568 2.92 S 4.90 100 207-1546 2.92 S 4.90 100 207-1579 2.92 S 4.90 100 207-1879 2.92 S 4.90 100 207-1883 3.99 S 6.70 100 207-1873 3.99 S 6.70 P 25m 207-1571 3.99 S 6.70 P 25m 207-1571 3.99 S 6.70 P 25m 207-</td> <td>7g 207-1637 2 77 S 4.65 POM a 30ml 070-9311 1 61 S 2 70 a 100 028-7651 2 92 S 4.90 a 100 028-7652 2 92 S 4.90 a 100 027-6568 2 92 S 4.90 a 100 207-1536 2 92 S 4.90 a 100 207-1579 2.92 S 4.90 a 100 207-1579 2.92 S 4.90 a 100 207-1579 2.92 S 4.90 a 100 207-1589 3.94 S 6.70 a 100 207-1982 3.16 S 5.30 a 100 207-1987 3.99 S 6.70 p a 25ml 207-1587 3.99 S 6.70 P a 25ml 207-1587 3.99<td> To 207-1637 2.77 S 4.65 POM a Skin care alimond range cleansing lotton facial and up f</td><td> To be compared to the compar</td><td> Time</td><td> Vitis Co</td><td> 30ml 070-9311 1 61 S 270 a a a a a a a a a </td><td> With Co 100 207-2064 3-99 S 6.70 P </td></td>	76g 207-1637 2.77 S 4.65 POM 30ml 070-9311 1.61 S 2.70 100 028-7052 2.92 S 4.90 100 028-7052 2.92 S 4.90 100 027-16568 2.92 S 4.90 100 207-1546 2.92 S 4.90 100 207-1579 2.92 S 4.90 100 207-1879 2.92 S 4.90 100 207-1883 3.99 S 6.70 100 207-1873 3.99 S 6.70 P 25m 207-1571 3.99 S 6.70 P 25m 207-1571 3.99 S 6.70 P 25m 207-	7g 207-1637 2 77 S 4.65 POM a 30ml 070-9311 1 61 S 2 70 a 100 028-7651 2 92 S 4.90 a 100 028-7652 2 92 S 4.90 a 100 027-6568 2 92 S 4.90 a 100 207-1536 2 92 S 4.90 a 100 207-1579 2.92 S 4.90 a 100 207-1579 2.92 S 4.90 a 100 207-1579 2.92 S 4.90 a 100 207-1589 3.94 S 6.70 a 100 207-1982 3.16 S 5.30 a 100 207-1987 3.99 S 6.70 p a 25ml 207-1587 3.99 S 6.70 P a 25ml 207-1587 3.99 <td> To 207-1637 2.77 S 4.65 POM a Skin care alimond range cleansing lotton facial and up f</td> <td> To be compared to the compar</td> <td> Time</td> <td> Vitis Co</td> <td> 30ml 070-9311 1 61 S 270 a a a a a a a a a </td> <td> With Co 100 207-2064 3-99 S 6.70 P </td>	To 207-1637 2.77 S 4.65 POM a Skin care alimond range cleansing lotton facial and up f	To be compared to the compar	Time	Vitis Co	30ml 070-9311 1 61 S 270 a a a a a a a a a	With Co 100 207-2064 3-99 S 6.70 P

Amendments to list of Manufacturers and Distributors

Aspects Beauty Company (Code 1655) Balneath Manor South Charley Lewes Earl Sussex BNR 4AP Tel: 012.3-408800 Fax 01273-401177 Email. marketing@aspec(sbeaut)	-	Derek Grain Contracts Ltd (Code 123) Unit 8 Awsworth Road Trading Estate Awsworth Road Ilkeston Derbyshire DE7 8HX Tel 0115 932 3442 Fax: 0115 932 3442 Enail: derek proutef@ralk.21 con-	d
Cedar Health Ltd (Code 5945) Pepper Road Bramhall Moor Lane Hazel Grove Stockport Cheshire SK7 5BW Tel. 0161-483 1235 Fax: 0161-456 4321 Email: ecdarhealth@compuserve	c e.com	Email: derekgranitd@taik.21 com Dove Marketing Ltd (Code 3698) 12 Wolte Close Parkgate Business Park Nutsford Cheshire WA16 8XJ Tel 01565 632000 Fax: 01565 632740	d
Comforta Healthcare Ltd (Code 4861) Navigation Road Trading Estate Diglis Worcestershire WRS 3DE Tel. 01905 356524	đ	Invicta Pharmacenticals (Code 1836) Ramsgate Road Sandwich Kent CT1.3 NVJ Tel: 01304-616161 Fax: 01304-616221	d
Contrast Marketing Ltd (Code 391) Sterling House 67 Lawrence Road London N15 4EY Tel: 020-8880 1080 Fax 020-8800 0338	d	Medik International Ltd (Code 4916) Unit 2 Crystal Way Elm Grove Road Harrow Middlesex HA1 2HP Tel. 0208 863 4198 Eax* 0208 426 0768	c
Cory Bros Co Ltd (Code 9252) 6 Bittacy Business Centre Bittacy Hill London NW7 1BA Tel. 020-8349 1081 Fax 020-8349 1962 David Somerset	d	Email: medikinternational@comp Nelson & Russell (Code 1076) Broadheath House 83 Parkside London SW19 SLP Tel: 0208-8780-4200 Orders Tel: 0800 289515	e e
(Code 1380) P.O Box 8 Henley-on-Thames Oxfordshire RG9 6YZ Tel: 01491 578080 Fax: 01491 574736 Email: david@somersets.com		Fax: 020 8780 5893 Richborough Pharmaceuticals Div. of Pfizer Ltd (Code 3300) Ramsgate Road Sandwich Kent CTT3 9NJ	d
Dentanurse UK 1.td (Code 2795) The Mill Preston on Wye Herelordshire HR2 9JU Tel 01981 500135 Eax 01981 500115 Email: sales@dentanurse.com	c	Tel. 01304 616161 Fax: 01304 616221 Videom Marketing Ltd (Code 264) 236 Cricklewood Lane London NW2 2PU Tef 0208-8880 1080 Fax: 020-8800 0338	i



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On September 9th and 10th 2001, Chemex will open its doors in Docklands at ExCeL, a perfect location for the UK's biggest community pharmacy exhibition.

On September 9th the National Pharmaceutical Association's Autumn Conference 2001 will take place at ExCeL, a perfect location for the UK's most influential pharmacy trade association.

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ExCeL is the nation's latest state-of-the-art exhibition centre. It is located in the stunning surroundings of London's Docklands. It is easy to reach by road, rail and air – just 15 minutes from the M25, 20 minutes from the West End via the Jubilee Line, and next to the London City Airport. It offers 5,000 visitor-parking spaces, six on-site hotels and a range of business facilities and places to wine and dine unequalled at any other UK venue.

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Put the date in your diary now!

For more information, please call the Chemex team on 01732 377256

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